

Report on an unannounced inspection of

# **HMP Channings Wood**

by HM Chief Inspector of Prisons

**10, 11, 17–20 September 2018**

This inspection was carried out with assistance from colleagues at the General Pharmaceutical Council and in partnership with the following bodies:



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### **Glossary of terms**

We try to make our reports as clear as possible, but if you find terms that you do not know, please see the glossary in our 'Guide for writing inspection reports' on our website at:  
<http://www.justiceinspectorates.gov.uk/hmiprisons/about-our-inspections/>

# Introduction

HMP Channings Wood is a category C training and resettlement prison near Newton Abbott in Devon. Holding up to 724 adult men, the prison's campus comprises eight residential units, some dating back to the early 1970s when the prison first opened, others added more recently. Those held represented the full range of sentences, with the majority serving between two and 10 years and a small number serving indeterminate sentences. A sizeable proportion of those held were located separately as vulnerable prisoners, either because of the nature of their offence or because they were seeking protection.

Channings Wood was last inspected in late 2016 when we assessed outcomes as being not sufficiently good against all four of our healthy prison tests. At this inspection we were made aware of the problems the prison had faced in recent years and the view expressed that improvements had been made more recently. This was probably the case, although the picture remained very mixed and we again assessed outcomes in all four of our healthy prison tests – safety, respect, purposeful activity and rehabilitation and release planning – as being not sufficiently good.

There had been efforts to improve safety at the prison but these were often uncoordinated, which undermined their effectiveness. Our survey of prisoners revealed that nearly two-thirds had felt unsafe in the prison in the past, with a third still feeling unsafe at the time of the inspection. The reception and induction of mainstream prisoners was good but was in sharp contrast to the induction experienced by vulnerable prisoners, who were subject to squalid conditions and intimidation from others.

Violence was rising in the prison but the quality and understanding of related data, as well as the unsatisfactory quality of investigations, undermined the prospects for improvement. We were not assured that the well-being of vulnerable prisoners was always sufficiently safeguarded and the prison lacked a coordinated approach to the reduction of violence linked to the problem of drugs. Testing indicated a positive rate for drug usage in the prison of around 30% and over three-quarters of prisoners thought illicit drugs were easy to access. Inadequate supervision of prisoners, for example, meant there were repeated opportunities for drug misuse and associated violence.

Since we last inspected, two prisoners had tragically taken their own lives and the number of self-harm incidents had doubled. Despite this, important recommendations following investigation of these deaths had not been implemented and case management support was often poor. The support from peer workers for those in crisis was better.

The environment in Channings Wood reflected stark contrasts. Much of the accommodation was of a good standard and prisoners appreciated their access to the pleasant surrounding grounds. On three units, however, in our view, failures of leadership had led to some very poor standards with prisoners living in often bleak and dirty cells. In addition, access to general amenities was at best mixed. Kit and cleaning materials were usually accessible but many showers, although again accessible, were in a poor condition. Prisoners expressed some negative perceptions concerning the quality of the food and the fairness of complaints arrangements, but our observations overall were more positive in these areas.

Most prisoners felt respected by staff and indicated that they knew who to turn to for help. Our own observations, however, suggested variability and polarisation. We saw much positive work being undertaken by staff of all disciplines working appropriately to set and maintain standards. On the poorer wings, in contrast, we found staff congregating in offices, failing to set standards or maintain supportive living conditions and failing to challenge delinquent behaviour on the part of prisoners. It was our view also that the significant number of newer, less experienced officers needed greater support.

Work to promote equality had deteriorated since we last inspected. Team meetings were poorly attended and action planning was weak. Consultation among prisoners with protected characteristics varied greatly, as did outcomes. Health care provision was stretched and was largely reactive, although waiting times to see clinicians were reducing.

Prisoners had reasonable access to time out of cell, although we found about 16% locked in their cells during the working day. Slippage in daily routines was a further source of frustration to many prisoners. The prison had sufficient full-time activity places for most but the management of attendance and punctuality was poor. Similarly, the quality of teaching, learning and assessment required improvement. That said, the provision benefited from some realistic working environments and peer mentors made a valued contribution. Most prisoners completed their qualifications and a small number could progress to higher learning. Our colleagues in Ofsted, however, judged the overall effectiveness of provision as 'requires improvement'.

The prison's reducing reoffending strategy was limited and needed review. Oversight lacked rigour and consistency, and many prisoners did not have an up-to-date offender assessment system (OASys) assessment or sentence plan. Added to this, contact between prisoners and their supervisors was often reactive and unfocused, which undermined the achievement of objectives. Public protection measures, as well as release and resettlement planning, were similarly weak and inconsistent.

Inconsistency of outcomes was a recurrent theme of our findings at this inspection. This was best exemplified in varying standards being accepted across the different accommodation wings, but also in the way initiatives to bring about improvement were often implemented in a partial or uncoordinated way. Managers were enthusiastic and open about making progress, but optimism and energy needed to be harnessed in a way that ensured leaders at all levels were visible, demanding consistent standards, and ensuring improvement was embedded and sustainable. We leave the prison with several recommendations which we hope will assist that process.

**Peter Clarke CVO OBE QPM**  
HM Chief Inspector of Prisons

November 2018

# Fact page

## Task of the establishment

Category C adult male training and resettlement prison

## Certified normal accommodation and operational capacity<sup>1</sup>

Prisoners held at the time of inspection: 667

Baseline certified normal capacity: 698

In-use certified normal capacity: 698

Operational capacity: 724

## Notable features from this inspection

*Two-thirds of prisoners had felt unsafe during their stay at Channings Wood.*

*76% of prisoners said it was easy to get illicit drugs and 27% had developed a drug problem while in the prison.*

*Half of the prisoners at Channings Wood lived in a clean and decent environment, while the other half lived in very poor conditions.*

## Prison status (public or private) and key providers

Public

Physical health provider: Care UK

Mental health provider: Care UK

Substance misuse provider: Care UK – EDP Drug and Alcohol Services

Learning and skills provider: Weston College

Community rehabilitation company (CRC): Dorset, Devon and Cornwall CRC (Working Links)

Escort contractor: GeoAmey

## Prison group/Department

Devon and North Dorset

## Brief history

Channings Wood prison was built on the site of a Ministry of Defence base in 1973 and opened in July 1974. Further building programmes have taken place over the last two decades with the addition of 104 prisoner places in living blocks 7 and 8.

## Short description of residential units

The establishment has eight residential units, known as living blocks (LBs). LB1 to LB5 are similar in layout, with two spurs of 56 cells over two floors. LB1 accommodates 138 prisoners and is the only unit with single cells that are holding two prisoners. LB2 to LB5 each accommodate 112 prisoners, and are designated as single occupancy. LB6 and LB7 accommodate prisoners on the highest level of privileges, holding 34 and 40 prisoners respectively. LB8 accommodates 64 prisoners in double cells.

<sup>1</sup> Baseline CNA is the sum total of all certified accommodation in an establishment except cells in segregation units, health care cells or rooms that are not routinely used to accommodate long stay patients. In-use CNA is baseline CNA less those places not available for immediate use, such as damaged cells, cells affected by building works, and cells taken out of use due to staff shortages. Operational capacity is the total number of prisoners that an establishment can hold without serious risk to good order, security and the proper running of the planned regime.

LB1, LB5 and LB7 house vulnerable prisoners, and the remainder of the units house mainstream prisoners.

**Name of governor and date in post**

Richard Luscombe, March 2018

**Independent Monitoring Board chair**

Gerald Hine-Haycock

**Date of last inspection**

October 2016



# About this inspection and report

A1 Her Majesty's Inspectorate of Prisons is an independent, statutory organisation which reports on the treatment and conditions of those detained in prisons, young offender institutions, secure training centres, immigration detention facilities, police and court custody and military detention.

A2 All inspections carried out by HM Inspectorate of Prisons contribute to the UK's response to its international obligations under the Optional Protocol to the UN Convention against Torture and other Cruel, Inhuman or Degrading Treatment or Punishment (OPCAT). OPCAT requires that all places of detention are visited regularly by independent bodies – known as the National Preventive Mechanism (NPM) – which monitor the treatment of and conditions for detainees. HM Inspectorate of Prisons is one of several bodies making up the NPM in the UK.

A3 All Inspectorate of Prisons reports carry a summary of the conditions and treatment of prisoners, based on the four tests of a healthy prison that were first introduced in this inspectorate's thematic review *Suicide is everyone's concern*, published in 1999. The tests are:

**Safety** Prisoners, particularly the most vulnerable, are held safely.

**Respect** Prisoners are treated with respect for their human dignity.

**Purposeful activity** Prisoners are able, and expected, to engage in activity that is likely to benefit them.

**Rehabilitation and release planning** Prisoners are supported to maintain and develop relationships with their family and friends. Prisoners are helped to reduce their likelihood of reoffending and their risk of harm is managed effectively. Prisoners are prepared for their release into the community.

A4 Under each test, we make an assessment of outcomes for prisoners and therefore of the establishment's overall performance against the test. There are four possible judgements: In some cases, this performance will be affected by matters outside the establishment's direct control, which need to be addressed by Her Majesty's Prison and Probation Service (HMPPS).

- **Outcomes for prisoners are good.**  
There is no evidence that outcomes for prisoners are being adversely affected in any significant areas.
- **Outcomes for prisoners are reasonably good.**  
There is evidence of adverse outcomes for prisoners in only a small number of areas. For the majority, there are no significant concerns. Procedures to safeguard outcomes are in place.
- **Outcomes for prisoners are not sufficiently good.**  
There is evidence that outcomes for prisoners are being adversely affected in many areas or particularly in those areas of greatest importance to the well-being of prisoners. Problems/concerns, if left unattended, are likely to become areas of serious concern.
- **Outcomes for prisoners are poor.**  
There is evidence that the outcomes for prisoners are seriously affected by current

practice. There is a failure to ensure even adequate treatment of and/or conditions for prisoners. Immediate remedial action is required.

- A5 Our assessments might result in one of the following:
- **recommendations:** will require significant change and/or new or redirected resources, so are not immediately achievable, and will be reviewed for implementation at future inspections
  - **examples of good practice:** impressive practice that not only meets or exceeds our expectations, but could be followed by other similar establishments to achieve positive outcomes for prisoners.
- A6 Five key sources of evidence are used by inspectors: observation; prisoner surveys; discussions with prisoners; discussions with staff and relevant third parties; and documentation. During inspections we use a mixed-method approach to data gathering and analysis, applying both qualitative and quantitative methodologies. Evidence from different sources is triangulated to strengthen the validity of our assessments.
- A7 Other than in exceptional circumstances, all our inspections are unannounced and include a follow up of recommendations from the previous inspection.
- A8 All inspections of prisons are conducted jointly with Ofsted or Estyn (Wales), the Care Quality Commission, the General Pharmaceutical Council (GPhC) and HM Inspectorate of Probation. This joint work ensures expert knowledge is deployed in inspections and avoids multiple inspection visits.

## This report

- A9 This explanation of our approach is followed by a summary of our inspection findings against the four healthy prison tests. There then follow four sections each containing a detailed account of our findings against our *Expectations. Criteria for assessing the treatment of and conditions for men in prisons (Version 5, 2017)*.<sup>2</sup> The reference numbers at the end of some recommendations indicate that they are repeated, and provide the paragraph location of the previous recommendation in the last report. Section 5 collates all recommendations and examples of good practice arising from the inspection. Appendix II lists the recommendations from the previous inspection, and our assessment of whether they have been achieved.
- A10 Details of the inspection team and the prison population profile can be found in the appendices.
- A11 Findings from the survey of prisoners and a detailed description of the survey methodology can be found in the final appendix of this report. Please note that we only refer to comparisons with other comparable establishments or previous inspections when these are statistically significant.<sup>3</sup>

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<sup>2</sup> <https://www.justiceinspectorates.gov.uk/hmiprison/our-expectations/prison-expectations/>

<sup>3</sup> The significance level is set at 0.01, which means that there is only a 1% chance that the difference in results is due to chance.

# Summary

- S1 We last inspected HMP Channings Wood in 2016 and made 65 recommendations overall. The prison fully accepted 47 of the recommendations and partially (or subject to resources) accepted 16. It rejected two of the recommendations.
- S2 At this follow-up inspection we found that the prison had achieved 22 of those recommendations, partially achieved one recommendation and not achieved 41 recommendations. One recommendation was no longer relevant.

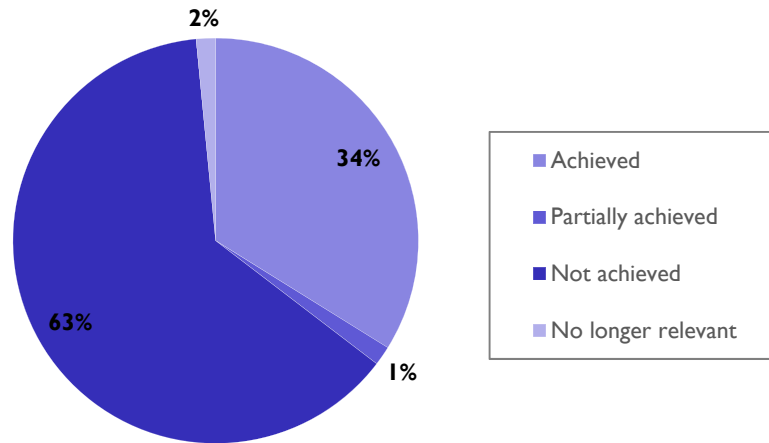
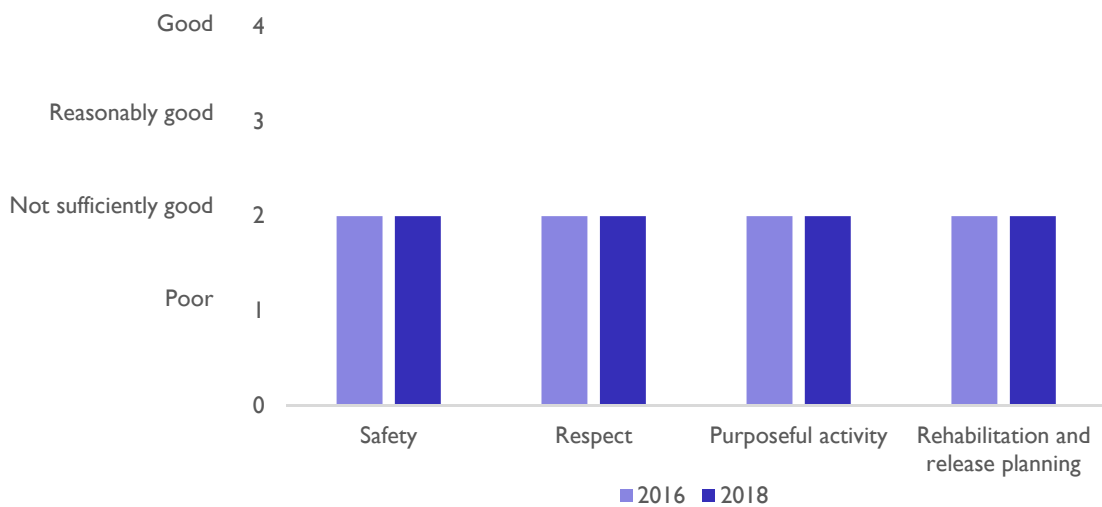


Figure 1: HMP Channings Wood progress on recommendations from last inspection (n=65)

- S3 Since our last inspection outcomes for prisoners stayed the same in all healthy prison areas. Outcomes were not sufficiently good in all healthy prison areas.

Figure 2: HMP Channings Wood healthy prison outcomes 2016 and 2018<sup>4</sup>



<sup>4</sup> Please note that the criteria assessed under each healthy prison area were amended in September 2017. Healthy prison outcomes reflect the expectations in place at the time of each inspection.

## Safety

**S4** *The early days experience for mainstream prisoners was good but new vulnerable prisoners lived in conditions that put them at risk. Levels of violence had risen and were high with one in three prisoners feeling unsafe. Evidence of significant under-reporting had not been addressed. Efforts to reduce violence were uncoordinated and therefore largely ineffective. There were positive initiatives to motivate good behaviour but too much poor behaviour went unchallenged. The use of force was high and oversight by managers did not provide sufficient assurance that it was always appropriate. The establishment did not have a grip on the significant drug problem. Care for prisoners in crisis was good for some but too variable overall. **Outcomes for prisoners were not sufficiently good against this healthy prison test.***

**S5** *At the last inspection in 2016, we found that outcomes for prisoners in Channings Wood were not sufficiently good against this healthy prison test. We made 17 recommendations in the area of safety.<sup>5</sup> At this inspection we found that seven of the recommendations had been achieved and 10 had not been achieved.*

**S6** Reception processes were appropriate, but prisoners waited too long to be moved to the induction units. Mainstream prisoners' experience of first night and induction on living block (LB) 8 had improved hugely and was good. Prisoners were placed in clean accommodation and received good support from staff and peer workers. In contrast, vulnerable prisoners spent their early days on LB 1, a squalid environment where they were often subject to theft and intimidation from other prisoners. Induction for vulnerable prisoners was also substandard and many waited too long to be allocated to activity.

**S7** In our survey, 61% of prisoners had felt unsafe at Channings Wood and a third of prisoners reported feeling unsafe at the time of the inspection. Levels of violence had increased and were high. Although reported data were comparable to other category C prisons, we also found evidence of significant under-reporting that managers were aware of but had not yet addressed. The safer custody team analysed violence data at a monthly meeting. However, this meeting was poorly attended, and there was little evidence to demonstrate that actions were completed. Few violent incidents were appropriately investigated. Despite the introduction of Challenge, Support and Intervention Plan in May 2018, no perpetrators were being formally monitored and support for victims of violence was inadequate.

**S8** The mix of sex offenders and mainstream vulnerable prisoners located on LB 1 created an unacceptable risk and failed to safeguard the sex offender population. A new weekly complex case meeting showed promise but was not yet working effectively. The prison lacked a coordinated whole prison approach to reducing violence linked to the drug strategy. More prisoners than at comparator prisons said they had been treated fairly under the incentives and earned privileges scheme. A number of opportunities were available to motivate good behaviour such as access to an enhanced unit, a progression unit, peer support roles and release on temporary licence for a small number of prisoners. During the inspection, prisoners complained about too much low-level poor behaviour that went unchallenged by staff. We observed this on LBs 1, 3 and 4 in particular. There were also too many outstanding adjudications for violent behaviour.

**S9** Use of force had increased significantly since the previous inspection and was high. Governance was poor and did not provide assurance that force was always used appropriately.

<sup>5</sup> This included recommendations about substance use treatment, which in our updated Expectations (Version 5, 2017) now appear under the healthy prison area of respect.

- S10 The fabric of the segregation unit was in poor condition but there had been some small and important improvements to the regime. Relationships between staff and prisoners were very good. It was too early to ascertain the effectiveness of recently introduced reintegration planning but we found evidence to suggest that stays on the unit were relatively short.
- S11 Supervision of prisoners was not always adequate which created opportunities for drug misuse and incidents of violence. The mandatory drug testing rate (including NPS<sup>6</sup>) was over 30%. In our survey, 76% of prisoners said it was easy to get drugs and we observed many prisoners under the influence of illicit substances. The prison's strategy to tackle the significant drug problem lacked coordination and was not integrated across key functional areas. None of the safety or drug strategies clearly identified or adequately sought to address factors increasing the demand for drugs such as poor living conditions, regime curtailment and a lack of supervision by staff.
- S12 There had been two self-inflicted and one non-natural death since the previous inspection. Important Prisons and Probation Ombudsman recommendations had not been implemented. In addition, investigations into near misses continued to lack rigour. The number of self-harm incidents had doubled since the previous inspection and was driven by substance misuse, bullying or, on occasion, frustration at the inability to have legitimate concerns heard. While some care was good, it was inconsistent and in too many cases poor. Case reviews were not multidisciplinary, care maps were generally poor and the required level of observations did not take place. Peer workers provided valued support to prisoners and assistance to staff.

## Respect

**S13** *We observed positive relationships between staff and prisoners in many areas. However, poor behaviour often went unchallenged. Most external areas were well maintained and appreciated by prisoners. Some accommodation was clean and well managed but half the population lived in poor conditions that were dirty and vandalised. On the worst units, supervision was poor and low standards were set. Prisoners complained about food. There was good use of peer support across the prison. Work on equality and diversity was not prioritised, leading to poor outcomes for some prisoners with protected characteristics. Support for LGBT prisoners was good. There were significant weaknesses in the delivery of health care. **Outcomes for prisoners were not sufficiently good against this healthy prison test.***

**S14** *At the last inspection in October 2016, we found that outcomes for prisoners in Channings Wood were not sufficiently good against this healthy prison test. We made 26 recommendations in the area of respect. At this inspection we found that nine of the recommendations had been achieved, one had been partially achieved and 16 had not been achieved.*

- S15 We observed some positive and caring interactions between prisoners and staff from all disciplines. Most prisoners said that there were staff whom they could turn to for help. However, we frequently found staff congregating in offices rather than out supervising prisoners. Managers and staff tolerated some terrible living conditions and poor behaviour often went unchallenged. There was a good use of peer support in many functions across the prison.
- S16 There were stark variations in the culture and conditions across the different living units ranging from very good on LBs 5 and 8 to poor on LBs 1, 3 and 4. The external areas around

<sup>6</sup> New psychoactive substances generally refers to synthetic cannabinoids, a growing number of man-made mind-altering chemicals that are either sprayed on dried, shredded plant material or paper so they can be smoked or sold as liquids to be vapourised and inhaled in e-cigarettes and other devices.

LBs 5, 7 and 8 were very clean and well kept. Prisoners appreciated the ability to walk around the grounds. The provision of clean bedding had improved and there was good access to cleaning materials. Some prisoners had personalised their cells and kept them clean. However, laundry arrangements for the majority of prisoners were not working well. Most cells had kettles and televisions. A lack of proactive visible leadership had led to the prevalence of poor standards on LBs 1, 3 and 4. Wing cleaners and painters were not managed and offensive graffiti was evident inside and outside cells. Too many prisoners lived in bleak conditions in dirty cells with broken windows. Although there was reasonable access to showers, many were not fit for purpose, with missing tiles, peeling paintwork and a lack of privacy.

- S17 Too many prisoners complained about the quality and quantity of the food. Very few prisoners had access to toasters and microwaves to prepare their own meals. Existing methods of seeking feedback on food were ineffective. The food we sampled was of a reasonable quality, and most prisoners now had the opportunity to eat together, which was good.
- S18 Arrangements to consult prisoners were predominantly through group meetings but the minutes produced were not always focused on actions.
- S19 There was good oversight of the complaints system and the small number of responses we sampled were balanced, prompt and fair. However, in our survey, only 31% of those who had made a complaint said that the system operated fairly, which required further exploration.
- S20 Some of the structures that supported the good equality and diversity provision at the last inspection had deteriorated. Equality action team meetings were infrequent and often poorly attended. The equality and diversity action plan was not monitored sufficiently or updated often enough, and monitoring of equality data was weak.
- S21 Many prisoners from black, Asian and minority ethnic backgrounds expressed little confidence in the complaints system and, in our survey, no respondents from a black or minority ethnic background said that complaints were dealt with fairly. Consultation with these prisoners had slipped and was inconsistent. There was reasonable support for older prisoners and those with disabilities, particularly on LB 5. Support for LGBT prisoners was well established and better than we often see. However, prisoners under 25 were disproportionately represented in incidents of violence, use of force and segregation. Little was done to help staff understand the impact of maturity on behaviour or to adjust systems and procedures to support this vulnerable group. Support for foreign national prisoners was also inadequate. The chaplaincy offered a wide range of services and provided good pastoral support to prisoners. The longstanding vacancy for a Muslim chaplain was filled during the inspection.
- S22 Primary care was stretched and delivering a largely reactive service. Clinical governance needed strengthening to improve patient outcomes. However, waits for most clinics were short and had improved since the last inspection. Social care arrangements were established but care packages were not being delivered. The range of support provided for patients with mental health problems met most needs, but poor access to therapeutic space on residential units was hindering the work of the team. Substance misuse clinical treatment was individually tailored and evidence based. Nearly a third of the population were accessing a good range of psychosocial support. There were high levels of psychoactive substance use, but the integrated substance misuse service was not notified of all incidents.
- S23 Supervision of medicine queues was inconsistent and privacy was limited. There was evidence that some prisoners were intimidating others for their medicines and we found

some delays in patients receiving routine follow-up prescriptions. Dental services were good with reasonable waiting times.

## Purposeful activity

**S24** *Time out of cell was reasonable for most prisoners. However, the regime for unemployed prisoners and those who were self-isolating was poor. Library and PE provision was good. Ofsted judged that the overall effectiveness of learning, skills and work provision required improvement. There were sufficient full-time activity places for the majority of prisoners but attendance and punctuality were poor. The quality of teaching had declined. Peer mentors were used well to support learning. Most prisoners behaved well in activities and took pride in their work. Achievements were generally good with the exception of functional skills in English and mathematics. **Outcomes for prisoners were not sufficiently good against this healthy prison test.***

**S25** *At the last inspection in October 2016, we found that outcomes for prisoners in Channings Wood were not sufficiently good against this healthy prison test. We made seven recommendations in the area of purposeful activity. At this inspection we found that two of the recommendations had been achieved and five had not been achieved.*

**S26** Time out of cell for most prisoners was reasonable at about eight and a half hours. Time out for the significant number of unemployed prisoners was much less at three hours, and we were particularly concerned about a smaller group of self-isolating prisoners who were unlocked for less than an hour a day. Regime slippage around unlock times was a source of frustration for prisoners and some staff. In our roll checks we found about 16% of prisoners locked up during the working day which was less than at the previous inspection.

**S27** The library was welcoming and contained an excellent range of books and resources which met the needs of prisoners. Staff were friendly and very good at promoting literacy while peer mentors helped prisoners with poor reading skills. Access to the gym and PE facilities were good. They included outdoor areas for team sports and other activities, which the men appreciated. A reasonable range of employment-related qualifications was available, as well as activities to support healthy living.

**S28** Leadership and management of learning, skills and work required improvement. Senior prison managers had not placed sufficient emphasis on the importance of learning, skills and work. Partnerships remained strong and Weston College delivered a wide range of vocational training courses, the vast majority of which provided accredited qualifications. Despite that, vulnerable prisoners were unable to access the full range on offer. The prison provided enough full-time activity places for the majority of the population and most prisoners were allocated to an activity. However, the management of attendance and punctuality was poor. The management of the OLASS provision by Weston College had declined since the previous inspection and required improvement. Effective pre-release courses enabled prisoners to prepare for employment and included access to the internet job application system virtual campus.

**S29** The quality of teaching, learning and assessment in education and vocational training had declined and required improvement. Teachers' marking of prisoners' work was inconsistent and did not always show prisoners how they could improve. They did not always check prisoners' understanding of a topic before moving on to a new subject. Teachers focused too much on prisoners completing tasks and did not use sufficiently interesting and challenging tasks to motivate learners. However, peer mentors were used effectively to support prisoners during learning sessions and practical activities. Prisoners benefited from

realistic working environments and from the use of high technology equipment in the wood mill. The laundry contract offered the opportunity to apply for work with the company on release.

- S30 Sessions often started late and finished too early. However, when there, most prisoners took pride in their work and valued education and vocational training. They were very well behaved and respectful to each other and to prison and other staff.
- S31 Most prisoners completed their qualifications and those on vocational training and some education courses achieved well. A small number of prisoners progressed to higher level learning through distance learning and Open University courses. Prisoners' achievements of functional skills in English and mathematics at levels 1 and 2 required improvement.

## Rehabilitation and release planning

**S32** *Support for prisoners to maintain family ties was reasonably good. The strategy to reduce risk and rehabilitate prisoners did not meet the needs of all prisoners. Sentence planning was not central to the management of prisoners at Channings Wood. Too many prisoners did not have a completed offender assessment system (OASys) assessment but the quality of those that were completed was reasonable. There was not enough oversight of offender supervisors and contact with prisoners was limited. There were weaknesses in the management of MAPPA (multi-agency public protection arrangements) eligible prisoners that created potential risk on release. There were gaps in the provision of offending behaviour programmes. Home detention curfew (HDC) and release on temporary licence (ROTL) were used well to support reintegration into the community. All prisoners had a release plan but too many were released without settled accommodation. **Outcomes for prisoners were not sufficiently good against this healthy prison test.***

**S33** *At the last inspection in October 2016, we found that outcomes for prisoners in Channings Wood were not sufficiently good against this healthy prison test. We made 15 recommendations in the area of resettlement.<sup>7</sup> At this inspection we found that four of the recommendations had been achieved, 10 had not been achieved and one was no longer relevant.*

- S34 Prisoners had daily access to telephones. The provision for Storybook Dads was excellent. The visitors' centre had good facilities and provided support and advice for families. There were adequate social visits and family visits were now open to all prisoners. However, too many prisoners experienced curtailed visits despite visitors arriving in good time.
- S35 The reducing reoffending strategy was due for review. It did not identify and address the needs of specific groups of prisoners such as long termers or care leavers. Oversight of work was through a quarterly committee but attendance was inconsistent. Despite this, there was evidence of progress in some areas of work.
- S36 Too many prisoners did not have an up-to-date OASys or sentence plan and the strategy to address the backlog of prisoners with no OASys was ineffective. That said, those that were completed were of an adequate standard. Case administration processes for the whole of the sentence were clear and adhered to but there was no strategic focus on offender management or oversight of the quality of work completed by offender supervisors. In too many cases contact between prisoners and offender supervisors was limited, reactive in

<sup>7</sup> This included recommendations about reintegration planning for drugs and alcohol and reintegration issues for education, skills and work, which in our updated Expectations (Version 5, 2017) now appear under the healthy prison areas of respect and purposeful activity respectively.



nature and with little focused offending behaviour work. There was no evidence that offender supervisors were driving the sentence plan objectives.

- S37 Management of HDC processes had been strengthened, although too many prisoners still experienced delays beyond their earliest eligibility date. There was no specific support for prisoners serving indeterminate sentences and they were not prioritised for offender supervisor support. Prisoners often experienced delays in moving to open conditions once approved.
- S38 There was an up-to-date public protection policy. Mail and telephone monitoring was effective but there were inadequacies in the management of MAPPA eligible cases (multi-agency public protection arrangements). Levels were not always confirmed before release. Not all relevant cases were discussed at the interdepartmental risk management team meeting which presented potential risk on release.
- S39 Accredited programmes were targeted appropriately, but there had been no on-site interventions for prisoners convicted of a sexual offence for nearly two years. The prison continued to make suitable use of release on temporary licence and processes were robust. Provision for prisoners with external debt problems had been strengthened. Information provided by the community rehabilitation company indicated that over the last six months 12% of prisoners had been released without settled accommodation. In addition, there was no follow up to assess the sustainability of the accommodation prisoners went to.
- S40 Prisoners were seen by the resettlement team to develop a resettlement plan for their release but some transferred to Channings Wood too close to their release date to arrange access to all available services. Practical arrangements on the day of release were good.

## Main concerns and recommendations

- S41 Concern: Levels of violence and self-harm were too high, much of it linked to drug misuse, and too many incidents were not reported. There were numerous policies designed to address violence, manage perpetrators, support victims and address the serious drug problem. However, there was no oversight of this disjointed work and much of it had not been implemented effectively. Neither the safety nor drug strategy identified or adequately addressed factors increasing the demand for drugs such as poor living conditions, regime curtailment and a lack of staff supervision.

**Recommendation: The governor should develop a coordinated strategy to improve outcomes across the main measures of safety that is clearly understood by staff at all levels and across all disciplines. The strategy should be led by senior managers and should include clear goals and measures of success and articulate clearly how improvement will be achieved.**

- S42 Concern: There were stark differences in culture and conditions across the different living blocks. Half of the prisoners at Channings Wood lived in a clean and decent environment, while the other half lived in very poor conditions. In living blocks 5 to 8, living conditions were much better. Staff set appropriate standards for prisoners and challenged unacceptable behaviour; they encouraged and supported prisoners to take personal responsibility. In contrast, standards and outcomes on living blocks 1, 3 and 4 were poor.

**Recommendation: A clear set of standards for daily living that address living conditions, personal standards, behaviour and how individuals conduct themselves towards others should be applied consistently across the prison. Such**

**standards should be modelled pro-socially by managers and staff who should be accountable for improvements.**

- S43 Concern: Many of the residential buildings were in poor physical condition, dirty and poorly maintained. There were leaking roofs, broken furniture and sanitation, missing windows, poorly screened showers and damaged flooring.

**Recommendation: The poor structural state of the living blocks should be addressed; windows and broken furniture should be replaced, privacy screens should be installed in showers, buildings should be made waterproof. Prisoner cleaners and painters should have clear job descriptions and their work should be monitored by staff and managers.**

- S44 Concern: Learning and skills and work activities were not given sufficient priority. There were enough activity places for all prisoners to be fully occupied, but places were underused. Too many prisoners were late or failed to attend.

**Recommendation: Learning and skills and work activities should be given a significantly higher priority. Staff at all levels should cooperate to promote participation and attendance. Prisoners who do not attend should be challenged.** (Repeated main recommendation S56)

- S45 Concern: The effectiveness of the inter-departmental risk management team was undermined by an inadequate referral process, which meant it did not routinely review release arrangements for all high-risk prisoners. There was no robust process to ensure that MAPPA levels were set in sufficient time to facilitate multi-agency planning for release.

**Recommendation: The process to refer prisoners to the interdepartmental risk management team should be improved to ensure that all high-risk of harm cases due for release are reviewed regularly. MAPPA levels should be confirmed in time for the prison to be fully involved in multi-agency planning for release.**

# Section 1. Safety

**Prisoners, particularly the most vulnerable, are held safely.**

## Early days in custody

### Expected outcomes:

**Prisoners transferring to and from the prison are safe and treated decently. On arrival prisoners are safe and treated with respect. Risks are identified and addressed at reception. Prisoners are supported on their first night. Induction is comprehensive.**

- I.1 The escort vehicles that we looked at were clean and prisoners said they were treated well by escort staff. Prisoners arriving at lunch time when reception was closed experienced delays in alighting from vehicles. All new arrivals were strip-searched, often needlessly, having transferred from another prison where they had been strip-searched on departure.
- I.2 The reception area was reasonable for the small number of new arrivals received each day. Reception staff were friendly and the process included a health care assessment, a private safer custody interview and a discussion with reception staff about compacts and property. Prisoners could also see a safer custody peer worker and reception orderly who offered useful support and provided basic items, including hot drinks, first night packs and prison clothing. New arrivals could also buy a canteen pack in reception. These procedures were appropriate but were not carried out swiftly and it took too long to move prisoners to their induction units.
- I.3 There was a stark difference between the first night and induction experience of mainstream prisoners and that of vulnerable prisoners. Mainstream prisoners were located on living block (LB) 8 which was well managed and provided some of the best living conditions in the establishment. Cells were well equipped and clean with in-cell showers. New arrivals were interviewed by staff and could make a telephone call on their first night. They had good access to Insiders (prisoners who introduced new arrivals to prison life) who led the induction process. The induction programme was good and included a tour of key departments. In our survey, 81% of mainstream prisoners said that they felt safe on their first night. The experience of mainstream prisoners in their early days had improved hugely since our last inspection in 2016.
- I.4 In contrast, vulnerable prisoners spent their first few weeks on LB 1 which was a wholly unsuitable environment for new prisoners. The block housed sex offenders but also many mainstream prisoners who had sought protection for their own safety. This was often because of drug debt. Many of these prisoners were using NPS<sup>8</sup> and stole from new arrivals to pay for illicit substances that were used openly on the wing. In our survey, only 31% of vulnerable prisoners said they felt safe on their first night and we met many who reported being robbed and intimidated on arrival at Channings Wood (see paragraph I.10). The unit was in a squalid condition: communal areas were in a very poor state of repair, many windows were broken and prisoners were regularly placed in dirty cells lacking basic items such as pillows, televisions and kettles (see photographs of LB 1 in Appendix V). Far fewer vulnerable prisoners said they had access to telephones or showers and our observations reflected this.

<sup>8</sup> New psychoactive substances generally refers to synthetic cannabinoids, a growing number of man-made mind-altering chemicals that are either sprayed on dried, shredded plant material or paper so they can be smoked or sold as liquids to be vapourised and inhaled in e-cigarettes and other devices.

- 1.5** Vulnerable prisoners had access to peer support from the Insiders but some elements of their induction did not take place swiftly and delayed their access to activity.

## Recommendation

- 1.6** **Vulnerable prisoners should be kept safe during their early days and their experience and induction should be equivalent to their mainstream peers.**

## Managing behaviour

### Expected outcomes:

**Prisoners live in a safe, well ordered and motivational environment where their positive behaviour is promoted and rewarded. Unacceptable conduct is dealt with in an objective, fair, proportionate and consistent manner.**

### Encouraging positive behaviour

- 1.7** Levels of violence against staff and prisoners had increased since the previous inspection. The reported data indicated that violence was no higher than in similar establishments, but we found that many violent incidents had not been recorded on the HMPPS incident reporting system. The establishment had failed to address this issue despite being aware of it since late 2017 (see paragraphs 1.13 and 1.41). The violence recorded was frequently linked to illicit drug use and associated debt.
- 1.8** In our survey, a third of prisoners said they felt unsafe at the time of the inspection and 61% said they had felt unsafe at some time at Channings Wood. This was worse than at the last inspection when we recorded figures of 14% and 44% respectively, and worse than in comparable prisons. Our survey also indicated that more prisoners than in comparable prisons said they had been subjected to verbal abuse, threats and physical assault, while 43% said their canteen or property had been stolen. Seventy-eight per cent of vulnerable prisoners located on LBs 1, 5 and 7 said they had been subjected to verbal abuse and 65% had had canteen or property stolen.
- 1.9** Some prisoners described to us regular intimidation by other prisoners when they were collecting medication. We frequently observed prisoners gathering in areas with little supervision or challenge by staff (see paragraphs 1.40 and 2.3). The HMPPS 'Challenge, support and intervention plan' (CSIP)<sup>9</sup> process designed to tackle violence and support victims had been introduced four months before the inspection. However, not one perpetrator had been monitored on CSIP in that time and support for victims of violence was poor.
- 1.10** Since the previous inspection, more mainstream prisoners who were vulnerable due to factors such as drug debts were being located on LBI which was the induction unit for sex offenders. Although the vulnerable mainstream prisoners were risk assessed, many went on to victimise the sex offenders located on the unit and there was no consistent approach to managing this.
- 1.11** Staff knew which prisoners were self-isolating on mainstream units. A new strategy to support these prisoners had been introduced shortly before the inspection but it had yet to

<sup>9</sup> The 'Challenge, support and intervention plan' (CSIP) is a casework process designed to manage and improve behaviour and support the victims of violence. Perpetrators and victims are monitored on a bespoke action plan by a multidisciplinary team.

be circulated widely to staff. The prison had also taken the positive step of appointing several prisoner safer custody representatives who were beginning to provide valuable peer support for vulnerable prisoners who isolated themselves from the rest of the population.

- I.12** However, the regime for self-isolating prisoners was poor, comprising little more than 30 minutes out of cell each day to make a telephone call and have a shower. There was no provision for these prisoners to exercise in the open air. Reintegration plans for self-isolating prisoners were often not completed and managers opted to transfer them out rather than address the underlying issues which frequently related to debt and drugs.
- I.13** A local survey of prisoners and their perceptions of violence had been carried out in late 2017. Responses demonstrated prisoners' concerns about safety, such as the bullying of vulnerable prisoners and the lack of staff supervision. The approach to reducing violence was disjointed. Several policies pertained to violence reduction but these were not widely understood by staff. For example, two separate policy documents were dated August 2018, one on violence reduction and one on a zero-tolerance approach to violence. Neither document referred to the useful evidence from the local survey or our previous inspection, nor did they provide staff with sufficient or practical guidance on how to reduce the high levels of violence to make the prison safer.
- I.14** Staff and managers tolerated too much vandalism, particularly on residential units 1, 3 and 4 (see photographs of LB 2 and 3 in Appendix V).
- I.15** The safer custody team was reasonably well resourced, although staff were often re-deployed to other duties. The records tracking this were inadequate and managers were not fully aware of the extent of the problem. Efforts by safer custody officers to address the increase in violence did not always result in action by managers to address the issues being presented. For example, the team had created a useful database which demonstrated that too many violent incidents were not investigated. Between April and August 2018, they recorded 560 incidents, but only 31 investigations had taken place. Furthermore, in a sample of 20 incidents that we looked at, only one had been adequately reported on HMPPS systems (see main recommendation S41).
- I.16** A weekly complex case meeting had recently been introduced by the safer custody team. This was encouraging, although action points were not always shared with relevant staff. It was too early to assess the effectiveness of the meetings (see paragraph I.47).
- I.17** The safer custody team presented a useful range of data to a monthly safer custody meeting to identify trends and hotspots. However, the meeting was poorly attended and actions to address and reduce violence were limited. The team had also tried to develop a violence reduction action plan but many of the actions were low level and not sufficiently strategic to effect real sustainable improvement. The poor attendance at the safer custody meeting and lack of drive behind a meaningful action plan once again demonstrated a lack of coordination and inadequate support for the safer custody team.
- I.18** In our survey, 47% of prisoners said they had been treated fairly under the incentives scheme against the comparator of 36%. Several initiatives had been introduced to motivate positive behaviour such as access to enhanced units for mainstream and vulnerable prisoners, peer support roles and the opportunity to apply for release on temporary licence.
- I.19** Many prisoners complained to us about low-level poor behaviour that went unchallenged by staff. Inspectors observed this on several occasions.

## Recommendations

- I.20 All incidents should be reported to ensure that the prison has an accurate picture of drug misuse, violence and self-harm.**
- I.21 All prisoners, including vulnerable prisoners, should have access to a full regime.**

## Adjudications

- I.22** There had been just over 700 adjudications during the previous six months which was comparable to the previous inspection and similar prisons. Most adjudications concerned positive drugs tests or use of illicit substances.
- I.23** The adjudication documentation that we examined and hearings that we observed indicated that the system was fair. However, in 2016 a high number of adjudications had been referred to the police, 130 of which remained outstanding. We also found a further 100 adjourned cases waiting to be dealt with by prison governors. Many of the outstanding cases involved serious allegations of violence which meant that too many serious offences potentially went unpunished. This affected the credibility of the process but, as there had been no adjudication standardisation meeting since February 2018, it was not clear if managers were aware of the situation or had any credible plans to address it.

## Recommendations

- I.24 All adjudications, including those referred to the police, should be concluded in a timely manner.** (Repeated recommendation I.38)
- I.25 A regular adjudication standardisation procedure should be implemented to provide managerial oversight of disciplinary procedures.**

## Use of force

- I.26** During the previous six months, the use of force had increased from 72 incidents at the previous inspection to 113, which was now higher than at other category C prisons.
- I.27** Oversight of the use of force was not good enough to assure managers that it was always used proportionately or as a last resort. Use of force reports were not completed in a timely fashion, there was no central monitoring of the scale of the backlog, and most incident reports that we sampled lacked crucial elements of information. Body-worn cameras were issued to staff but they were not always turned on during incidents. There had been 34 planned incidents of use of force since April 2018, all of which should have been filmed and reviewed. However, managers could only provide footage of five incidents and the use of force committee had only viewed one incident since December 2017.
- I.28** Special accommodation<sup>10</sup> had been used 10 times in the previous six months. Stays remained relatively short at an average of 3 hours 6 minutes. Special accommodation was appropriately authorised and documentation showed that prisoners were removed once they became compliant.

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<sup>10</sup> Special accommodation is an unfurnished cell.

## Recommendation

- I.29 Oversight of the use of force should be strengthened: reports should be completed, incidents should be filmed and footage viewed to ensure that force is always justified.**

## Segregation

- I.30** The fabric of the segregation unit was in poor condition. Managers ensured that damage to cells was repaired promptly, but some flooring needed completely replacing due to wear and tear. Despite cells being painted regularly, the insides of doors were defaced with graffiti, some of which was offensive.
- I.31** The unit often ran to capacity, although the number of prisoners segregated in the previous six months had reduced and remained lower than we usually see at similar establishments. Records indicated that most stays were relatively short. Prisoners spoke positively about the staff on the unit and we observed good interactions.
- I.32** Staff delivered a consistent regime which had improved since the last inspection. Prisoners could now collect their own meals, exercise communally and had access to basic fitness equipment that had been installed in the exercise yard. However, CCTV cameras fitted in cells still covered toilet areas, and footage was routinely screened in the open staff office which was inappropriate.
- I.33** In the previous six months, only one segregation governance meeting had taken place, which was risky given that the meeting was designed to provide assurance that segregation was used appropriately.
- I.34** HMPPS senior psychologists were working with segregation staff to develop a support strategy for prisoners with complex needs and those segregated under Rule 45 (segregation for good order or discipline or in the prisoner's own interests). The strategy included the use of reintegration plans and showed promise.
- I.35** At the time of the inspection, two men in segregation were on ACCTs<sup>11</sup>. The plans were of reasonable quality and senior managers had approved the exceptional reasons for segregation.

## Recommendation

- I.36 The closed-circuit television coverage of cells should provide privacy in relation to prisoners' toilet facilities. (Repeated recommendation I.49)**

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<sup>11</sup> Assessment, care in custody and teamwork case management of prisoners at risk of suicide or self-harm.

## Security

### Expected outcomes:

**Security and good order are maintained through an attention to physical and procedural matters, including effective security intelligence and positive staff-prisoner relationships. Prisoners are safe from exposure to substance misuse and effective drug supply reduction measures are in place.**

- I.37** While most aspects of procedural security were proportionate, supervision of prisoners remained inconsistent. We regularly observed gatherings of prisoners with little or no staff presence and we were told on a number of occasions that prisoners were often intimidated for medication or property (see paragraphs 1.8 and 2.101).
- I.38** The main security challenge was the prevalence of illicit substances which were widely available. In our survey, 76% of prisoners against the comparator of 49% said it was easy to get illicit drugs, and more than a quarter of prisoners said they had developed a problem with drugs while at Channings Wood. We observed several prisoners under the influence of drugs, not all of whom were challenged or referred to health care by the staff who also saw them.
- I.39** The most common drug being used was spice<sup>12</sup>. In the previous six months, 30% of mandatory drug tests (MDTs), including NPS, had tested positive. Drug testing prioritised mandatory testing because of the heavy weighting it had on HMPPS performance targets. This led to predictability in testing arrangements and very few suspicion tests which would have yielded more useful results.
- I.40** A drug strategy had been implemented in May 2018 and linked to a supply reduction action plan. Many of the actions had yet to be embedded and no correlation had been made between the increased demand for drugs and wider issues such as poor living conditions, regime curtailment and the lack of supervision by staff.
- I.41** There was no coordinated effort and little vigour to implement and drive the drug and supply reduction strategy. Records indicated that there had been no drug strategy meetings between August 2017 and March 2018. The meetings had recently been reintroduced and were now taking place every two months, although attendance by the invited departments was inconsistent. Attendance by key departments at the monthly security meeting was also poor.
- I.42** There were significant weaknesses in the physical security of the prison which exacerbated the risk of drug supply. There was public access around the prison's perimeter and staff regularly intercepted illicit items thrown over the fence. The HMPPS regional team had recently completed an impressive vulnerability assessment and made several pertinent recommendations.
- I.43** The prison held a high number of organised crime gang members. Despite clear evidence of collusion between prisoners and members of the public to traffic contraband into the establishment, security managers had been frustrated by a lack of support from local police. Work to tackle staff corruption had led to several resignations in recent months.
- I.44** A new senior manager had been appointed in late 2017 to lead on security and some progress had been made in addressing some of the significant challenges facing the prison. The manager had identified several key measures to address illicit drug use, for example the

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<sup>12</sup> A synthetic drug that mimics the effects of cannabis but is much stronger, with no discernible odour and unpredictable effects.



introduction of a tactical assessment to ensure that intelligence was analysed promptly and resources were directed appropriately. However, information was not always passed to security which affected the effectiveness of the intelligence assessment and too many incidents went unreported (see paragraph I.7).

## Recommendation

- I.45 The prison should ensure that the MDT and suspicion testing programmes are adequately resourced to undertake all testing within required timescales and in a way that minimises their predictability.** (Repeated recommendation I.32)

## Safeguarding

### Expected outcomes:

**The prison provides a safe environment which reduces the risk of self-harm and suicide. Prisoners at risk of self-harm or suicide are identified and given appropriate care and support. All vulnerable adults are identified, protected from harm and neglect and receive effective care and support.**

## Suicide and self-harm prevention

- I.46** There had been two self-inflicted deaths and one drug related death since the previous inspection. Some key recommendations from Prisons and Probation Ombudsman (PPO) investigations had not been implemented. Investigations had been carried out into serious attempts by prisoners to self-harm or commit suicide but key learning points had been missed.
- I.47** The number of self-harm incidents over the last six months had more than doubled since the previous inspection and was very high. Many incidents were caused by substance misuse and the associated debt, bullying and violence. In some cases, prisoners used self-harm to get their voices heard and to receive support. Managers were aware of this, but the response lacked coordination between key departments including violence reduction staff, security and substance misuse services (see paragraph I.17). Safer custody meetings were poorly attended and the action plan generated did not contain PPO recommendations or the coordinated action necessary to disrupt illicit activity.
- I.48** Care for prisoners at risk of self-harm varied. There were examples of good care, but we found too many prisoners living in poor conditions with little to occupy them. The quality of ACCT documents remained poor with weak assessments, inconsistent case management, poorly attended reviews and inadequate care plans. We saw several examples of the required observations not taking place.
- I.49** The number of Listener<sup>13</sup> call outs had reduced, in part because of the valued support which safer custody orderlies provided to prisoners and staff.
- I.50** A weekly complex case meeting was a potentially useful forum to discuss prisoners who were the most difficult to manage. However, the resulting actions were not always communicated to residential staff responsible for the care of prisoners (see paragraph I.15).

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<sup>13</sup> Prisoners trained by the Samaritans to provide confidential emotional support to fellow prisoners.

- I.51** There was one constant watch cell on LB 5 and one in health care. The cell in health care was used more frequently but it was a poor environment and too often prisoners did not have access to personal possessions while on constant watch.

## Recommendations

- I.52** The prison should produce and implement a comprehensive action plan addressing the underlying causes of self-harm.
- I.53** The management of ACCT processes should be strengthened to ensure that consistent case management improves care and provides activity for prisoners who are struggling to cope.

## Protection of adults at risk<sup>14</sup>

- I.54** A safeguarding policy had been implemented since the previous inspection which described the appropriate procedures to protect prisoners from harm. However, very few staff were aware of the policy and many of the measures to protect prisoners from bullying, violence and self-harm required improvement.

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<sup>14</sup> Safeguarding duties apply to an adult who:

- has needs for care and support (whether or not the local authority is meeting any of those needs); and
- is experiencing, or is at risk of, abuse or neglect; and
- as a result of those care and support needs is unable to protect themselves from either the risk of, or the experience of, abuse and neglect (Care Act 2014).

## Section 2. Respect

**Prisoners are treated with respect for their human dignity.**

### Staff-prisoner relationships

#### **Expected outcomes:**

**Prisoners are treated with respect by staff throughout their time in custody, and are encouraged to take responsibility for their own actions and decisions.**

- 2.1** In our survey, 78% of prisoners said that staff treated them with respect, which was significantly better than in similar establishments inspected in the year leading up to the inspection. Seventy-eight per cent also said they had staff they could turn to if they had a problem. However, over a third of the prisoners surveyed had experienced some form of victimisation by staff.
- 2.2** We observed some positive and caring interactions between prisoners and staff from all disciplines. The relationships that we observed on residential units were polarised. In living blocks (LBs) 5, 6, 7 and 8, relationships were generally good. Staff encouraged and supported prisoners to take personal responsibility for their time at Channings Wood. Most prison officers we spoke to set appropriate standards for prisoners and demonstrated the confidence to challenge unacceptable behaviour.
- 2.3** In contrast, LBs 1, 3, and 4 at times felt unmanaged. We saw too many examples of poor living conditions and bad behaviour going unchallenged by staff. We found groups of staff congregating in offices while unlocked prisoners were left unsupervised. We also found lone officers carrying out their duties surrounded by over-assertive or intoxicated prisoners. A lack of visible leadership had led to poor discipline and inadequate support for both staff and prisoners. This was particularly pertinent for the large number of very new officers expected to learn in these challenging areas.
- 2.4** Entries in prisoners' electronic case records were informative but intermittent.

### Recommendation

- 2.5** **Staff on living blocks 1, 3 and 4 should be out of unit offices providing appropriate supervision of prisoners and challenging poor behaviour.**

## Daily life

### Expected outcomes:

**Prisoners live in a clean and decent environment and are aware of the rules and routines of the prison. They are provided with essential basic services, are consulted regularly and can apply for additional services and assistance. The complaints and redress processes are efficient and fair.**

### Living conditions

- 2.6** There were stark variations in the culture and conditions across the different living units ranging from very good on LBs 6 and 8 to poor on LBs 1, 3 and 4. Half the prisoners at Channings Wood lived in a clean and decent environment, while the other half lived in very poor conditions. In LB 1, 52 prisoners were doubled up in cramped cells designed for single occupancy (see paragraph 2.3).
- 2.7** Communal and external areas of LBs 5, 6, 7 and 8 were well kept. The garden areas between residential units were landscaped and well maintained. Prisoners commented on how they valued the ability to walk around outside their units rather than being confined to bare exercise yards. The areas external to LBs 1, 3, and 4 were littered with rubbish from cell windows, although cleaning parties responded promptly each morning to clean the areas up.
- 2.8** Most communal areas had clean polished floors, and the better units were clean and reasonably well maintained. LBs 1, 3, and 4 were poorly maintained with smashed internal windows and broken furniture. Association areas and cell corridors were grubby.
- 2.9** In our survey, 91% of men said they could have a shower each day which was good. Communal showers were not fit for purpose in many units, with peeling paint, missing tiles and windows, and a lack of privacy. Some communal toilets were also in a poor state, and one clearly labelled 'not to be used' was being used but not cleaned, which was insanitary.
- 2.10** In LBs 5, 6, 7 and 8 most cells were personalised, clean and well decorated. Some cells on LBs 6 and 7 had a problem with water ingress. Despite this, prisoners preferred to live on these units because they felt safer and more supported. In LBs 1, 3, and 4 many cells were grubby and cluttered, and several were squalid. Some occupied cells had missing observation panels and smashed windows; some window frames still had dangerous glass shards in them. Toilets in some cells were very stained and most were inadequately screened. A prisoner in LB 3 complained of being placed in a cell for more than a week with a toilet which did not flush.
- 2.11** Access to cleaning materials was good and, on some units, it was clear that staff encouraged prisoners to clean their cells. Recent attempts to paint the prison had not yet covered the offensive graffiti we found in cells, communal areas and corridors.
- 2.12** Not all cells had the minimum furniture requirement and many on LBs 1, 3 and 4 lacked in-cell secure storage. All cells had televisions and kettles and most cells were fitted with notice boards. Only a few prisoners had access to microwaves or toasters, but there were plans to introduce them across more units.
- 2.13** All cells had emergency cell call bells but only 33% of respondents in our survey said they were answered within five minutes. We observed some rapid responses to cell bells but others were delayed beyond five minutes.

- 2.14** Prisoners could wear their own clothes, which they appreciated. The laundry service was not efficient and prisoners said that clothes were stolen or returned damaged. Access to clean sheets had improved since the last inspection.

## Recommendation

- 2.15** **Single cells designed for one prisoner should not be used for two.** (Repeated recommendation 2.9)

## Residential services

- 2.16** In our survey, only 22% of respondents said the quality of food was good against the comparator of 37%. Prisoners we spoke to complained about the quality and quantity of food they received. Prisoners could select lunch and dinner from a four-week rolling menu with a variety of healthy options each day, including fruit and vegetables. Catering comment books were easily accessible at meal times, and responses from the catering manager were written next to comments. The catering manager also met prisoner representatives to discuss menu options but negative perceptions of the food pervaded. The food we sampled was of a reasonable quality.
- 2.17** The evening meal was served too early on some units and the breakfast packs were issued at lunch on the preceding day. Small improvements had been made to the content of breakfast packs following consultation earlier in 2018.
- 2.18** The kitchen was reasonably clean, although menu items were unavailable at short notice because of the regular breakdown of machinery. Catering staff provided a good working environment for more than 20 prisoners in the kitchen. Prisoners could undertake basic catering courses in the kitchen, and more advanced courses with Weston College.
- 2.19** Serveries and food trolleys were cleaned following use. Most servery units lacked splash shields and some did not heat the food. Most servery workers wore protective clothing, and we observed appropriate supervision of serveries by staff. Most prisoners now had the opportunity to eat together, which was good.
- 2.20** Prisoners could buy from an extensive list of shop items, several of which had been selected following prisoner consultation. They could also shop from several catalogues. In our survey, 61% of respondents said the shop sold what they needed against 40% in 2016. New arrivals had to wait several days for their first shop orders, which increased the opportunity for bullying and debt. However, they could be advanced a variety of packs at reception and again during induction, which went some way to mitigate the delay.

## Recommendation

- 2.21** **The main kitchen and wing serveries should be fully equipped. The equipment should be fit for purpose and maintained in good working order.**

## Prisoner consultation, applications and redress

- 2.22** There was regular consultation with prisoners but minutes of the prisoner council meetings did not always designate responsibility and timescales for actions. Monthly unit forums had

been established recently and were business like. Prisoner representatives were active and visible around the prison, providing valued support to fellow prisoners.

- 2.23** In our survey, 76% of prisoners said it was easy to make an application while 59% thought the system was fair. Too many prisoners told us they had had to make repeat applications before receiving a response. The responses that we looked at were timely and focused but there was no quality assurance of the applications process by managers.
- 2.24** In our survey, only 53% of prisoners said it was easy to make a complaint and only 31% said that responses were fair. Twenty-four per cent of prisoners said they had been prevented from making a complaint. We saw no direct evidence of this but some complaints were returned to prisoners with advice to submit them as applications or as comments through the consultation procedures.
- 2.25** There had been an average of 58 complaints a month since January 2018, about a quarter of which concerned property lost before prisoners arrived at Channings Wood. Local data showed that 90% of complaints were answered on time. Responses that we sampled were balanced, prompt and fair, with 5-10% of complaints being upheld and/or containing an apology. An average of three confidential complaints a month were dealt with by the governor and responses to these complaints were good.
- 2.26** The governor scrutinised complaints each month and weekly reports were submitted to senior managers on late responses and new learning. However, a staggering 0% of black and minority ethnic prisoners thought that outcomes of complaints were fair compared to 37% of white prisoners, both of which indicated a lack of confidence in the complaints system that demanded further exploration by prison managers.
- 2.27** In our survey, only 34% of prisoners said it was easy to communicate with their legal representatives and 54% of prisoners said that staff had opened their legal mail when they were not present. The prison stated that this would happen exceptionally which was clearly at odds with the experience of prisoners. There was provision for legal visits twice a week which visiting solicitors described as very good. The library held an extensive stock of legal texts and documentation, and prisoners had access to computers for legal purposes.

## Equality, diversity and faith

### Expected outcomes:

**There is a clear approach to promoting equality of opportunity, eliminating unlawful discrimination and fostering good relationships. The distinct needs of prisoners with particular protected characteristics<sup>15</sup> and any other minority characteristics are recognised and addressed. Prisoners are able to practise their religion. The chaplaincy plays a full part in prison life and contributes to prisoners' overall care, support and rehabilitation.**

### Strategic management

- 2.28** Equality and diversity procedures had deteriorated since the last inspection.
- 2.29** The equality action team now only met every three months and staff attendance from key areas, including residential units, was inconsistent and sometimes poor. A full-time equality officer had been appointed who had yet to take up her post because the establishment was

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<sup>15</sup> The grounds upon which discrimination is unlawful (Equality and Human Rights Commission, 2010).

facing pressures with recruitment procedures. Many staff and prisoners we spoke to were unaware of her role.

- 2.30** The equality action plan was limited and there was little to indicate that it was being monitored adequately or that required actions were being carried out.
- 2.31** There was some evidence that the equality action team referred to HMPPS equality monitoring tool data, which were out of date and irrelevant by the time they were discussed. In any case, monitoring did not lead to clearly identifiable actions. For example, records showed that prisoners under the age of 25 accounted for a disproportionate number of violent incidents, use of force incidents and segregation. However, there was nothing in place to help staff understand the impact of maturity on behaviour or to adjust systems and procedures to support this vulnerable group.
- 2.32** Only 13 incidents of discrimination had been reported in the previous six months, which was much lower than at similar prisons and the previous inspection. Discrimination incident report forms were not freely available on the living blocks and prisoners had to request them, which potentially presented a significant disincentive to report such incidents. Investigations of recent incidents that we examined were reasonable but some responses were late and some prisoners we spoke to said they had not received a response at all. There was no quality assurance of responses by an external organisation. It was clear that prisoners from a black, Asian and minority ethnic background had little confidence in the system and, in our survey, none of these respondents said that complaints were dealt with fairly.
- 2.33** Consultation with minority groups was inconsistent and had declined since the last inspection. Some groups had regular meetings with staff but consultation for others had drifted and some had no forum at all. Community links were weak in most areas, although contact had been made with community LGBT support groups.

## Recommendations

- 2.34** **The equality officer should take up post without delay.**
- 2.35** **The equality action plan should be comprehensive and should be monitored regularly by senior managers to ensure that required actions are carried out.**
- 2.36** **Discrimination incident report forms should be freely available on all wings and should be answered promptly by an appropriate manager.**

## Protected characteristics

- 2.37** About 12% of the population were from a black, Asian and minority ethnic background. In our survey, their responses were similar to those of white prisoners, but were less positive about their experience of treatment according to their religious beliefs (see paragraph 2.49) and complaints (see paragraph 2.26).
- 2.38** Consultation with and representation for these prisoners had deteriorated since the last inspection and were inconsistent. Monthly meetings were often cancelled and, when they did take place, were often poorly attended. Prisoners told us that they often did not know about the meetings and that some staff lacked an awareness of different cultures. None of the prisoners we spoke to mentioned direct discrimination but some prisoners from a black and minority ethnic background told us that they felt different and isolated when they first

arrived. The population at Channings Wood and the prison's location were not as diverse as the parts of the country these prisoners were from. The prisoners who made these comments said they soon settled in and felt part of the community.

- 2.39** In our survey, 4% of respondents said that they were from the Gypsy/Romany/Traveller community. Support for this group was better than we usually see and included well-attended focus groups. The prisoner representative for this group was enthusiastic and said that he received good support from staff.
- 2.40** There was not enough provision for the 35 foreign national prisoners held at the time of the inspection. There remained little translated written material and professional telephone interpreting services were rarely used. We met a few prisoners who spoke little or no English and clearly felt isolated and anxious. There were no focus groups for foreign national prisoners and consultation with this group was poor.
- 2.41** Most foreign national prisoners told us that their immigration status remained their main concern. Prison staff lacked the expertise to support prisoners with immigration problems. An immigration officer attended the prison once a month, but no independent legal advice was available.
- 2.42** The care provided to prisoners with disabilities had improved since the last inspection. The prison had identified about 28% of prisoners as having a disability. In our survey, this group responded similarly to other prisoners. Eighty-one per cent said that staff treated them with respect and 85% that they had someone to turn to if they had a problem.
- 2.43** Community-based care workers provided personal support for prisoners with the most significant needs. On LB 5, managers had attempted to make reasonable adjustments to meet the individual needs of prisoners, including the provision of wheelchairs, walking aids, hospital beds, lowered call bells and grab rails. However, the fabric of the accommodation made some of these adjustments difficult to implement. Access to outside association and other aspects of the regime had improved for men with disabilities since the previous inspection and trained and paid 'buddies' continued to offer appropriate care on LB 5. The management of personal emergency evacuation plans was better than we often see and officers were aware of prisoners with these plans.
- 2.44** About 22% of the population were aged over 50. Provision for them had improved since the previous inspection and they indicated equitable or better treatment than younger prisoners across most indicators in our survey.
- 2.45** In our survey, 7% of respondents described themselves as gay or bisexual. It was positive that prisoners felt comfortable enough to disclose their sexuality. Support for LGBT prisoners was well established and better than we often see. The Rainbow Group continued to meet monthly and was well established in supporting gay, bisexual and trans prisoners, particularly on the vulnerable prisoner units. Support for this group on the other living blocks was not as good but prisoners there were encouraged to attend support meetings. The LGBT prisoners' representative on the vulnerable prisoner units was enthusiastic and proactive in supporting other prisoners. At the time of the inspection, one prisoner identified as trans was being offered reasonable support.



## Recommendations

- 2.46** Support for foreign national prisoners to help them feel less isolated should be improved, including the use of professional telephone interpreting services and access to a range of translated material.
- 2.47** Foreign national prisoners should have regular contact with the Home Office.
- 2.48** The equality strategy should address the needs of prisoners under the age of 25, with policies and procedures appropriate to their level of maturity.

## Faith and religion

- 2.49** In our survey, only 33% of black and Asian minority ethnic prisoners said that they felt their religious beliefs were respected and only 44% said they could speak to a chaplain of their faith if they wanted to. There had been no Muslim chaplain for some time and Muslim prisoners told us this was a cause of much frustration and that they felt disadvantaged. A new part-time Muslim chaplain took up post during the inspection.
- 2.50** Access to worship was good and, in our survey, 80% of prisoners who had a faith said they could attend services if they wished. Facilities for worship were good. The Christian chapel was spacious and provided a calm and quiet environment. The multi-faith centre was set out appropriately and fitted with washing facilities for Muslim worshippers.
- 2.51** The chaplaincy made a very good contribution to prison life through membership of management groups, regular visits to prisoners who were ill or distressed and meeting all new prisoners. They provided valued support to individual prisoners and staff who requested pastoral care. The chaplaincy also organised a lay visitors' programme for prisoners who did not have visits from family or friends.
- 2.52** Religious discussion and instruction groups were organised for the principal faiths. Community groups visited the prison and there were useful links with the community chaplaincy.

## Health, well-being and social care

### Expected outcomes:

**Patients are cared for by services that assess and meet their health, social care and substance use needs and promote continuity of care on release. The standard of provision is similar to that which patients could expect to receive elsewhere in the community.**

- 2.53** The inspection of health services was jointly undertaken by the Care Quality Commission (CQC)<sup>16</sup> and HM Inspectorate of Prisons under a memorandum of understanding agreement between the agencies. A number of areas have been identified that require improvement with subsequent notices issued by the CQC which are detailed in Appendix III of this report.

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<sup>16</sup> CQC is the independent regulator of health and adult social care in England. It monitors, inspects and regulates services to make sure they meet fundamental standards of quality and safety. For information on CQC's standards of care and the action it takes to improve services, please visit: <http://www.cqc.org.uk>.

## Strategy, clinical governance and partnerships

- 2.54** NHS England commissioned Care UK as lead provider of health care services in the prison. Partnership working and governance arrangements were established and a health needs analysis was informing care provision.
- 2.55** Local clinical governance systems were not driving improved outcomes for patients. A dedicated senior nurse had recently arrived and was establishing more effective systems but they were not yet embedded.
- 2.56** Patient engagement was limited and clinical oversight of the appointment system needed improvement. The incident reporting system was good, but some clinical leaders did not fully use the available information to promote learning.
- 2.57** Primary care staffing was stretched and not always able to meet demand with senior staff frequently pulled into routine care, leaving limited time for service development. The prevalence of psychoactive substance misuse added to staffing pressures and the service was reactive. Staff training was reasonable but clinical supervision was not routinely available, although some group reflective sessions were facilitated. The primary care team were resilient, and staff dealt with patients in a professional manner in the face of open dissatisfaction.
- 2.58** Access to services was equitable but no telephone interpreting service was available in reception. Waiting areas for vulnerable prisoners remained a concern, with patients periodically having to sit on an isolated corridor floor. A constant watch cell was inappropriately located in the health care department which disrupted activity and posed a health hazard in the event of a dirty protest.
- 2.59** The environment in the health care department was reasonable but there were not enough rooms to accommodate the full range of health clinics. The available treatment rooms were clean and met most standards. An audit programme reflected organisational drivers, but clinical audit was limited. The GP always had a nurse chaperone which was disproportionate given staffing pressures.
- 2.60** Response to medical emergencies was good. All health staff had immediate life support skills. Equipment was appropriate and regularly checked. Prison staff were first aid trained and a paramedic had been seconded to the team in light of psychoactive substance pressures to assess arrangements. The paramedic had taken steps to enhance responsiveness.
- 2.61** Policies were in place, but systems to ensure that staff were familiar with policy requirements had only recently been introduced as part of a new competency framework. An independent health complaints system had been introduced but many complaints had not been responded to and a backlog had developed. Complaints that had been dealt with did not always address the issue raised nor did written responses indicate how to escalate concerns if patients remained dissatisfied. A recent overhaul of the complaints system included face-to-face resolution, but further improvement was required to enhance prisoner outcomes.

## Recommendations

- 2.62** Clinical governance arrangements should deliver effective and safe staffing, robust audit and oversight, regular clinical supervision and a qualitative, well-advertised complaints system which provides timely and clear responses, including how to escalate unresolved concerns.
- 2.63** There should be sufficient clinical treatment rooms.
- 2.64** The waiting area for vulnerable prisoners should have enough seats and should be safe.
- 2.65** The constant watch cell in the health care department should be relocated.

## Promoting health and well-being

- 2.66** There was no coordinated strategic plan to engage prisoners in wellbeing activities, nor were any national campaigns implemented. Prisoners were not engaged in any initiatives and little information was provided for patients. Health screening and access to vaccinations for blood-borne viruses were facilitated, but clinics took place inconsistently and take up was limited. Barrier protection was available and there were policies to manage communicable disease and outbreaks.

## Recommendation

- 2.67** A health promotion strategy which includes prisoner involvement should be developed and implemented.

## Primary care and inpatient services

- 2.68** Prisoners received a primary health screening on the day of reception which identified individual needs and triggered health referrals where appropriate. Routine secondary health screenings were not in place at the time of our inspection.
- 2.69** Many prisoners were negative about access to health care services with only 22% in our survey saying it was easy or very easy to see a GP. However, 56% said the quality of GP provision was good or very good against the comparator of 44%. Staff told us they believed that appointment slips did not always reach patients on time. Appointments were triaged by administrative staff and clinical oversight of this was poor. An appropriate range of primary care services was available but clinics took place based on staff availability and there was no regular clinic timetable. GP provision was good and waiting times for a routine GP appointment were within two weeks, with daily GP slots and nurse triage clinics for those with urgent health concerns.
- 2.70** The care of patients with long-term conditions was overseen by the GP and a senior nurse. Nurse-led clinics for long-term conditions were being introduced but at the time of the inspection patients did not have personalised care plans to enable consistent care.
- 2.71** There was no local pathway for the identification and management of end of life care, and managers told us that patients with such needs would be transferred to a suitable establishment with appropriate facilities.

- 2.72** External health care appointments were well managed and occurred within community equivalent waiting times with appropriate clinical input. Three escort slots were provided each day. However, there was not enough flexibility to accommodate the frequent emergency appointments which increased the rescheduling of routine hospital appointments.
- 2.73** There were limited joint working arrangements with community providers. However, a local tuberculosis nurse was attending the prison to offer services to patients.
- 2.74** All patients leaving the prison were booked to attend a discharge clinic but they did not always attend and were not followed up. Patients were prescribed medication to take away but this did not always reach them before leaving reception.

## Recommendations

- 2.75 All prisoners should receive a secondary health screening.**
- 2.76 There should be clinical oversight of the appointment system to ensure that patients are appropriately booked in to clinics.**
- 2.77 Patients with long-term conditions should have individual care plans in place.**
- 2.78 All prisoners should receive their health information and medication before release.**

## Social care

- 2.79** Prisoners with social care needs were referred to the local authority by the health care team and were also able to self-refer. There were good links between the health care team and local authority and a dedicated social worker and occupational health worker were allocated to the prison. Social care assessments were carried out in a timely manner and referrals were appropriate.
- 2.80** Care UK was the provider of social care and an effective prison-led buddy system was in operation. Arrangements for obtaining equipment were adequate, but adaptations were difficult to effect given the fabric of the residential accommodation.
- 2.81** Three patients were receiving a social care package at the time of our inspection. Care plans for these patients were available on residential units. Electronic records suggested, and patients confirmed, that care was not delivered to these prisoners in line with their care package.

## Recommendation

- 2.82 Patients with social care needs should receive consistent care in line with their care plan.**

## Mental health care

- 2.83** Devon Partnership NHS Trust delivered an integrated mental health service. The team had a broad range of skills including nursing, social work, occupational therapy, IAPT<sup>17</sup> workers,

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<sup>17</sup> Improving Access to Psychological Therapies.

psychology and sessional psychiatry which offered a reasonable range of treatments including psycho-education, facilitated self-help, psychological therapies and specialist secondary care.

- 2.84** The service operated Monday to Friday. Demand was high with 55% of prisoners in our survey saying they had a mental health problem. There was an open referral system. The duty worker undertook all initial triage assessments and prisoners were seen in a timely fashion, usually within 48 hours. The team reviewed referrals and assessments daily to allocate an appropriate key worker, and case management reviews and complex cases were considered at a weekly meeting. The team had an active caseload of 50, and 15 prisoners with enduring and significant mental health problems were managed under the care programme approach<sup>18</sup>. Care plans were established and records indicated regular, qualitative contacts. Prisoners we spoke to valued the service but expressed frustration about the notification and location of appointments which they felt were too random. There were no therapy rooms in the health care centre and group work was seriously limited by lack of appropriate space.
- 2.85** The team did not offer a crisis service and, although they were committed to see all newly initiated ACCTs<sup>19</sup>, they did not always contribute to the multidisciplinary support offered to prisoners who self-harmed, with no involvement at all at weekends. Working relationships with other areas of the prison were positive and staff supported the work of the segregation unit. There were no delays in transferring prisoners to hospital who needed treatment for their condition under the Mental Health Act.
- 2.86** Prison staff received suicide and self-harm training and had access to a mental health awareness e-learning package.

## Recommendations

- 2.87** Prisoners should receive clear notification of appointments which should take place in appropriate settings, including in the health care department.
- 2.88** Dedicated space should be available for the facilitation of group work.
- 2.89** Prisoners should receive urgent mental health support during personal crisis, including the provision of professional mental health input at ACCT reviews where appropriate.

## Substance use treatment<sup>20</sup>

- 2.90** EDP Drug and Alcohol Services delivered psychosocial support and Care UK provided clinical treatment. Staff worked well together and were known as the integrated substance misuse service (ISMS).
- 2.91** The prison's substance misuse strategy was not informed by a comprehensive needs assessment. Joint working between ISMS and the prison was good. However, despite the scale of substance misuse, the ISMS manager was not part of the senior management team.
- 2.92** Psychoactive substances were a significant problem for the prison. During the previous four weeks, health care staff had been called to 84 incidents thought to involve psychoactive

<sup>18</sup> Mental health services for individuals diagnosed with a mental illness.

<sup>19</sup> Assessment, care in custody and teamwork case management of prisoners at risk of suicide or self-harm.

<sup>20</sup> In the previous report substance use treatment was included within safety, while reintegration planning for drugs and alcohol came under rehabilitation and release planning (previously resettlement).

substances. Too many officers we spoke to had not received any formal drug awareness training within the last year. Not all prisoners involved in suspected illicit drug use were referred to ISMS, which meant that prisoners who were developing problems with illicit drugs were not routinely encouraged to engage with services for support. This was poor.

- 2.93** The ISMS team were working hard to reduce demand for substances. Post-incident welfare checks were routinely undertaken for those referred to the service. A psychoactive substance awareness group was open to all prisoners, but attendance was poor.
- 2.94** EDP was now fully staffed, and a range of professionals delivered a good service including recovery work, family work, community work and counselling. An appropriate range of groups, one-to-one support and in-cell workbooks were used, and a weekly recovery café was a popular initiative. A regular service user forum influenced service improvement. Newly arrived prisoners were seen and provided with harm minimisation and service information.
- 2.95** Demand for the ISMS was high, with a third of prisoners receiving support. Personal recovery plans were reviewed with the prisoner regularly and were subject to audit. Good working relationships were established with other health providers which ensured coordinated care.
- 2.96** Prisoners on medication for addiction were well supported by two specialist nurse prescribers. The administration of ISMS medications was jointly undertaken by Care UK and EDP staff, which was a good initiative.
- 2.97** Prisoners being released were well managed by the full-time EDP community link worker who delivered impressive discharge planning and post-release support, particularly for those vulnerable to relapse. Naloxone was not available on release at the time of the inspection.

## Recommendations

- 2.98** **Prison officers should be trained to identify and support prisoners suspected of being under the influence of illicit drugs.**
- 2.99** **A clear referral pathway should be in place to ensure that all prisoners suspected of being under the influence of illicit drugs are referred to the integrated substance misuse service.**

## Medicines optimisation and pharmacy services

- 2.100** Pharmacy services were provided on site by Care UK. Patients could seek pharmacy support and see an independent prescriber, but access was limited because of a number of unfilled vacancies.
- 2.101** Medicines were administered three times a day and records were appropriately maintained on SystmOne (electronic clinical records). Patients who did not attend for medication were reviewed. Queues for the collection of medicines were not supervised consistently. The proximity and number of patients in queues compromised confidentiality and privacy which created opportunities for diversion. There were incident reports of patients being pressured to relinquish in-possession medication to other prisoners.
- 2.102** Timely supply of medicines to prisoners remained a concern. Staffing levels and the procedures for the transmission of prescriptions to the pharmacy contributed to the problem.

- 2.103** An in-possession policy was in place and risk assessments were attached on SystemOne but not all were reviewed in a timely manner. Sixty per cent of medicines were supplied in possession and the majority were weekly. The staff undertook infrequent random cell checks.
- 2.104** About 70 patients were receiving opiate substitution treatment from a central location in health care. The Methasoft equipment used for methadone was cleaned and calibrated each day. Provision was well managed and supervision was good with an opiate overdose protocol in place. However, patients arrived from the wings at different times and the start of administration was often delayed by the medication regime which caused frustration to prisoners.
- 2.105** Supply of medication on discharge was not managed efficiently. Medicines were not transported to reception in a timely manner and some patients were discharged with no medicines.
- 2.106** Prescribing of high risk and tradeable medicines was monitored and only 3% of patients were prescribed one or more tradeable medicines at the time of the inspection.
- 2.107** Standard operating procedures were in place and, although there was a good range of patient group directives,<sup>21</sup> they were not fully used particularly for more potent medicines. The canteen offered a small range of medicines for simple conditions and supplies were documented. A range of antibiotics and emergency medicines were available. Weekend prescriptions were dispensed at a nearby pharmacy.
- 2.108** Storage of medicines was adequate. Refrigerator temperatures were monitored and stock reconciliation procedures were in place. The pharmacist chaired the monthly medicines management meeting and staff had access to up-to-date reference sources.

## Recommendations

- 2.109 The independent prescribing pharmacist's skills should be used to the full to improve patient access and management of long-term conditions.**
- 2.110 The supervision of queues for collection of medicines should be improved to ensure patient confidentiality and privacy is maintained and the risk of bullying and diversion is limited.**
- 2.111 Patients leaving the establishment should be supplied with take-out medicines and these should be delivered in a timely manner.**
- 2.112 Patient group directives should be implemented to enable health care staff to administer a wider range of potent medicines without a prescription.**

## Dental services and oral health

- 2.113** Time for Teeth delivered dental treatments equivalent to those in the community, in a clean and suitable environment. Governance arrangements were robust and staff received appropriate training and support.

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<sup>21</sup> Authorise appropriate health care professionals to supply and administer prescription-only medicine.

- 2.114** Routine appointments took about seven weeks because of a delay in the maintenance of some equipment. However, appointments were triaged and urgent needs were met by emergency appointments and additional sessions to alleviate the backlog.
  
- 2.115** The high rate of missed appointments was monitored and followed up appropriately. Patients received oral health and disease prevention advice.



## Section 3. Purposeful activity

**Prisoners are able and expected to engage in activity that is likely to benefit them.**

### Time out of cell

#### **Expected outcomes:**

**All prisoners have sufficient time out of cell and are encouraged to engage in activities which support their rehabilitation.**

- 3.1 Time out of cell for most prisoners was reasonably good. Fully employed prisoners could have about 8.5 hours unlocked but unemployed prisoners had just over three hours. Older prisoners who chose not to work and those deemed unfit to work could have just over four hours. We were concerned about the small number of self-isolating prisoners who received less than an hour out of their cells (see paragraph 1.11).
- 3.2 During roll checks in the middle of the working day, we found about 16% of the population locked in their cells compared with 20% at the last inspection.
- 3.3 There was still too much regime slippage. The lack of consistency in lock and unlock times across the units frustrated staff and prisoners. Prison records showed some curtailment of the regime, particularly on living blocks (LBs) 5 and 6. Staff and prisoners told us that on certain days the gym was closed because of staff shortages and library and education sessions were restricted, particularly for vulnerable prisoners. Evening lock-up remained at 6pm, which was too early. Some prisoners were unlocked each evening to access telephones and/or a late gym session, subject to staff availability.
- 3.4 The library was well managed and provided a service which met the diverse needs of prisoners. A full-time librarian was supported by part-time assistants and three trained prison orderlies. Opening times during the week were very good but sessions for vulnerable prisoners on Fridays were sometimes cancelled because of staff shortages on the main living units. Most prisoners could use the library at least three times a week. In our survey, 51% of respondents said they went to the library once a week or more.
- 3.5 The library management information system had not improved sufficiently since the previous inspection. Staff were still unable to monitor library use fully so that data on which prisoner groups used the library could be generated to help inform remedial action.
- 3.6 The library was bright, spacious and well equipped and there were dedicated spaces for private study. The range of reading material was very good, including fiction and non-fiction books, local and national newspapers, magazines, easy reads, graphic novels and classic literature. There was a small but reasonably well-equipped library/reading room on LB 5.
- 3.7 There was a good range of educational and vocational books for prisoners taking courses, and additional resources could be acquired through an inter-library loan service. Library and education staff promoted reading through several initiatives such as the Shannon Trust<sup>22</sup> reading scheme, reading groups and the Six Book Reading Challenge.

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<sup>22</sup> Provides peer-mentored reading plan resources and training to prisons.

- 3.8** Prisoners had good access to a wide range of indoor and outdoor sports facilities and equipment, including a multi-use sports hall, weight room, cardiovascular suite, outdoor football pitch and a classroom. Most equipment was in a reasonable condition but some cardiovascular exercise machines were old and worn. Most areas were clean but showers were unscreened and in a very poor state and the sports field toilets were out of use.
- 3.9** Prisoners received a clear and comprehensive induction to the gym which covered the facilities and programmes offered. Gym staff assessed prisoners' health before they used the facilities, and ensured they understood safe use of the gym equipment.
- 3.10** Gym sessions were very well managed and every prisoner could usually attend at least three times a week. However, sessions were sometimes cancelled so that PE staff could help unlock prisoners on the main living units when there were staff shortages. In our survey, only 48% of prisoners said they used the gym twice a week or more. The prison did not monitor which groups of prisoners used the gym.
- 3.11** The prison provided a well-planned and varied range of courses and had reintroduced sports qualifications for prisoners. PE staff were well qualified and experienced.
- 3.12** Useful links with the health care department remained in place and PE staff provided effective support for prisoners with identified physical or mental health needs. Healthy living and the importance of exercise remained very well promoted through PE courses, courses in health education and remedial PE. Staff provided very good remedial support to prisoners considered unsuitable to participate in normal physical activities. They also ran dedicated sessions for prisoners who had reached retirement age. There were useful links with local football teams, who came into the prison during the summer to compete against a team of prisoners.

## Recommendations

- 3.13 A full regime which starts and finishes on time should be in place for all prisoners.**
- 3.14 Gym use across different groups should be monitored to ensure equity of access.** (Repeated recommendation 3.40)
- 3.15 Showers and toilet facilities in the gym and on the sports field should be fit for use.** (Repeated recommendation 3.41)

## Education, skills and work activities (Ofsted)<sup>23</sup>

### Expected outcomes:

**All prisoners can engage in activities that are purposeful, benefit them and increase their employability. Prisoners are encouraged and enabled to learn both during and after their sentence. The education, skills and work provision is of a good standard and is effective in meeting the needs of all prisoners.<sup>24</sup>**

**3.16** *Ofsted made the following assessments about the education, skills and work provision:*

<b>Overall effectiveness of education, skills and work:</b>	<b>Requires improvement</b>
<i>Achievements of prisoners engaged in education, skills and work:</i>	<i>Requires improvement</i>
<i>Quality of education, skills and work provision, including the quality of teaching, training, learning and assessment:</i>	<i>Requires improvement</i>
<i>Personal development and behaviour:</i>	<i>Requires improvement</i>
<i>Leadership and management of education, skills and work:</i>	<i>Requires improvement</i>

### Management of education, skills and work

**3.17** The main weakness in the management of education, skills and work identified at the previous inspection had not been rectified. The expectations of senior prison managers were not high enough. Learning and skills and work activities were not given sufficiently high priority to promote better participation and attendance. Prisoners who did not attend activities were not challenged sufficiently.

**3.18** The management of the provision of education and training by Weston College required improvement. Outcomes for functional skills in mathematics at levels 1 and 2 were lower than at the previous inspection and the quality of teaching, learning and assessment had deteriorated. Weston College had identified weaknesses in teachers' performance but performance management had not yet delivered improvement in prisoners' achievements of functional skills at levels 1 and 2. Not enough teachers were set clear targets following observations and appraisals to improve their teaching craft.

**3.19** Senior prison managers had forged very strong and successful partnerships with employers and community support agencies, and had secured commercial contracts which provided prisoners with meaningful and realistic work. Employers regularly visited the prison and some, for example the laundry contractor, had offered prisoners guaranteed job interviews on release. A number of employers in the community had provided useful placements for a small number of prisoners released on temporary licence.

**3.20** The prison's self-evaluation and quality improvement planning did not adequately reflect their strengths or identify what needed to improve. They did not set challenging targets or

<sup>23</sup> This part of the inspection is conducted by Ofsted inspectors using Ofsted's common inspection framework. This ensures that prisons are held accountable to the same standard of performance as further education colleges in the community.

<sup>24</sup> In the previous report reintegration issues for education, skills and work were included within rehabilitation and release planning (previously resettlement).

monitor the quality of provision in enough detail to ensure that improvements were identified clearly and shared with all staff.

- 3.21** The education curriculum emphasised English and mathematics and broadly met the needs of the majority of prisoners. However, the provision for vulnerable prisoners was limited and many prisoners told us they found it difficult to get on courses. This was reflected in our survey. Managers offered distance learning and Open University programmes to a small number of prisoners, most of whom were using student loans to fund their courses. Weston College staff had improved English and mathematics support in work areas such as the wood mill and textile shop, and a few prisoners were making good progress towards achieving a qualification. There were no structured education courses for the few prisoners for whom English was a second or other language (ESOL). However, teachers did provide effective individual support.
- 3.22** Prison leaders and managers were clearly focused on helping prisoners gain useful employability skills and the industry workshops were well equipped with commercial standard resources. Prisoners developed high technology programming skills in the wood mill where computer numerical control machines were used effectively to manufacture prison furniture. Prison managers had increased the range and variety of vocational training and nearly all areas gave prisoners the opportunity to gain accredited qualifications recognised by industry. Most of the courses offered qualifications up to level 2 and a few courses were at levels 3 and 4. At the time of the inspection, a few courses were not running.
- 3.23** Senior prison managers provided enough full-time activity places for about 85% of the population and most prisoners were allocated quickly to an activity. Approximately 16% of prisoners were locked up on their living units when we visited. It was confirmed that this figure was regularly higher when the restricted regime was activated in response to staff shortages. On these occasions, only three-quarters of prisoners allocated to industry workshops could attend and the remainder stayed on the units which was not sufficient for a training prison. Attendance at functional skills courses and a few vocational training courses was low. Prison managers did not manage punctuality well and too many prisoners arrived late to activities and often finished early (see paragraph 3.36). In one workshop we observed prisoners being allowed to arrive at their workshop and go straight to the tea area where they made tea and sat down to chat. The instructor struggled to get them to their work benches. Activity sessions continued to be frequently interrupted by prisoners attending appointments.
- 3.24** The induction process was effective. All prisoners were given an initial assessment of their English and mathematics skills which was used to inform the allocation process. However, waiting lists for courses and work activities were lengthy and a few prisoners waited too long to get on to courses or work. The prisoners' pay scheme was under review to provide an incentive to participate in education and training.
- 3.25** Weston College staff supported most prisoners effectively, providing advice and guidance on their arrival. A good pre-release course covered CV writing, dealing with disclosure and applying for jobs. Staff also provided good support with cooking and money management. Many prisoners used the virtual campus<sup>25</sup> for additional help with CV writing. Prisoners did not receive enough advice and guidance towards the end of their sentence.

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<sup>25</sup> Prisoner access to community education, training and employment opportunities via the internet.

## Recommendations

- 3.26** Senior prison managers should promote education and skills more effectively and should play a more significant part in evaluating the provision and setting challenging targets for improvement.
- 3.27** Senior prison managers should improve punctuality and attendance at activities to ensure that prisoners develop a good work ethic and benefit fully from education, training and work.
- 3.28** All prisoners should receive good advice and guidance on career progression throughout their sentence.

## Quality of provision

- 3.29** The quality of teaching, learning and assessment had deteriorated since the previous inspection. Teachers did not always support all prisoners in line with the college's expectations. In education and training sessions teachers used verbal feedback constructively to help prisoners improve. For example, prisoners in horticulture gained useful feedback about identifying different types of weed and how to eradicate them. However, teachers did not give enough constructive feedback to prisoners on their written work to enable them to improve. Teachers provided good support to the most motivated prisoners and many made good progress. However, the less able were not supported adequately. Some teachers and trainers in education and vocational training theory sessions did not use sufficiently interesting and challenging tasks to motivate prisoners. They focused too much on prisoners completing workbooks rather than developing learning.
- 3.30** A minority of teachers did not check prisoners' understanding of a topic properly before moving on to a new subject and some prisoners found activities too easy or too hard. Information from the initial assessment of prisoners' English and mathematics skills was not used sufficiently to plan individual learning. For example, one prisoner on the basic construction course had been a bricklayer, but his existing skills were not recognised or used effectively. Teachers in most functional skills learning sessions did not set individual targets for prisoners which reflected their starting points. Too many targets did not show clearly what prisoners needed to do to improve.
- 3.31** Trainers developed prisoners' mathematical skills well in vocational training. For example, in the pre-release cookery course prisoners weighed ingredients, worked out portion sizes and calculated savings by using cheaper ingredients. In the wood mill prisoners calculated wastage when cutting out materials to make furniture. However, in too many mathematics sessions, teachers gave prisoners tasks to complete without underpinning their knowledge or developing their skills sufficiently. The most successful teachers and trainers used peer mentors very effectively and prisoners who required extra help progressed well. Prisoners appreciated support from their peers.
- 3.32** Prisoners in practical vocational training sessions were motivated to learn and concentrated well. They enjoyed learning and gaining new practical skills. Trainers helped prisoners to develop their practical skills in most vocational and some education sessions, and particularly in cycle maintenance, horticulture and radio production. Prisoners were able to describe what they had learned and how they were putting these skills into practice.
- 3.33** Prison staff in the workshops motivated prisoners well and the vast majority valued the chance to work to industry standards, particularly on contract work. Most prisoners were

working well towards their qualifications. Prisoners made particularly good progress in barbering and preparation for release courses.

## Recommendations

- 3.34 Managers should ensure that the results of prisoners' initial assessment of English and mathematics support needs are routinely used to help plan individual learning.**
- 3.35 Teachers and trainers should provide clear and unambiguous feedback to prisoners so that they know how to improve.**

## Personal development and behaviour

- 3.36** Punctuality was poor: many prisoners arrived late and finished early in too many activities. This was not motivating and did not reinforce a work ethic sufficiently (see recommendation 3.27). Prisoners' behaviour in most activities was good, but too often staff did not challenge occasional poor behaviour and unacceptable language.
- 3.37** Vocational trainers helped prisoners to develop their mathematical skills. For example, in painting and decorating prisoners measured walls and calculated the wallpaper needed. In basic construction, prisoners recorded their achievements against mathematics targets on individual whiteboards. Trainers did not always record the development of personal and work skills.
- 3.38** Prisoners were mostly very respectful to each other and to prison and other staff. The vast majority of prisoners took great pride in their work. Prisoners worked well with each other to complete practical tasks in vocational training. Most prisoners we spoke to said that they enjoyed their education and training and felt safer in activity areas than on the living units.

## Recommendation

- 3.39 Teachers and trainers should record the development of personal and work skills to ensure that prisoners know what they are good at and what needs to improve.**

## Outcomes and achievements

- 3.40** Most prisoners completed their learning programme, progressed well and achieved accredited qualifications in most education and vocational courses. Achievements were high in entry level qualifications for functional skills in English and mathematics. There were no discernible variations in the achievements of different groups of prisoners. Prisoners in most workshops and on vocational training programmes developed good practical skills. Achievements, for the significant minority of prisoners, in functional skills in mathematics at levels 1 and 2 were low and required improvement.

## Recommendation

- 3.41 Teachers should improve prisoners' achievements in functional skills.**

## Section 4. Rehabilitation and release planning

**Prisoners are supported to maintain and develop relationships with their family and friends. Prisoners are helped to reduce their likelihood of reoffending and their risk of harm is managed effectively. Prisoners are prepared for their release back into the community.**

### Children and families and contact with the outside world

#### Expected outcomes:

**The prison supports prisoners' contact with their families and friends. Programmes aimed at developing parenting and relationship skills are facilitated by the prison. Prisoners not receiving visits are supported in other ways to establish or maintain family support.**

- 4.1 Choices Consultancy Services, a family support charity mainly staffed by volunteers, offered good support to prisoners and their families. Prisoners were seen individually during induction and an informative booklet was sent to families or available from the visitors' centre. Choices staffed the visitors' centre, ran the visits hall refreshments area and supervised the play area. The visitors' centre had good facilities, including private interview rooms. It was open two hours before visits started but some visitors arrived much earlier to ensure they got into the prison promptly when visits began (see paragraph 4.4). At the time of the inspection, there were no courses for prisoners to develop relationship and parenting skills. The Storybook Dads provision, which enabled prisoners to record a story for their children, was excellent.
- 4.2 In our survey, only 28% of prisoners against the comparator of 39% said it was easy for their family or friends to get to the prison. The local bus service did not run on Sundays and the prison did not provide any transport from the nearest train station.
- 4.3 The visits hall was a nice facility, although the furniture was fixed to the floor which conflicted with the otherwise relaxed atmosphere in the room. Children had ready access to the supervised play area.
- 4.4 Only a quarter of prisoners in our survey said their visits started and finished on time. Vulnerable prisoners were seated in the visits hall before sessions started, and other prisoners were called over as their visitors were admitted to the prison. We observed the last prisoners arrive at the visits hall 35 minutes after the first visit had started, which gave them shorter visits than other prisoners. Some visitors told us they arrived mid-morning to ensure they were in the first group to be admitted. Visits could be booked on line or by telephone.
- 4.5 Subject to vetting, all prisoners were now eligible to apply for child-centred visits which took place each month. These enabled prisoners and their families to interact more and take part in organised activities together. The visits were relatively short at two hours.
- 4.6 Most prisoners had daily access to telephones, although evening access was more restricted because of regime constraints which frustrated prisoners. There were suitable arrangements to manage mail.

## Recommendations

**4.7 Prisoners should have access to parenting and relationship courses.**

**4.8 Visits should start at the advertised time for all prisoners.** (Repeated recommendation 4.53)

## Reducing risk, rehabilitation and progression

### Expected outcomes:

**Planning for a prisoner's release starts on their arrival at the prison. Each prisoner has an allocated case manager and a custody plan designed to address their specific needs, manage risk of harm and reduce the risk of reoffending.**

- 4.9** The reducing reoffending strategy focused on resettlement pathways, although it also included the role of the offender management unit in delivering the reducing reoffending agenda. The reducing reoffending action plan was owned by the head of function and managed through a strategic committee that met quarterly. Attendance by the relevant representatives was inconsistent and some actions were carried over. However, there was evidence of progress in some areas.
- 4.10** A review of the reducing reoffending strategy was due and a prisoner survey had been completed as part of a needs analysis to inform the review. However, the focus of the strategy was again limited to resettlement pathways. There was no plan to use offender assessment system (OASys) data linked to offending, or to analyse the needs of specific groups of prisoners, for example those serving indeterminate sentences. This represented a missed opportunity to detail how the prison planned to address the specific needs of prisoners, manage the risk of harm and reduce the risk of reoffending.
- 4.11** Catch 22<sup>26</sup> delivered resettlement services for the contracted community rehabilitation company (CRC). The Catch 22 team was based some distance from offender supervisors which did not aid communication. This was somewhat mitigated by the fact that Catch 22 held a weekly resettlement meeting where information was shared with a multidisciplinary team (see paragraph 4.34).
- 4.12** The prison was preparing for the phased introduction of offender management in custody (OMiC), which was due to start imminently. They had appointed two senior managers to lead the offender management unit (OMU): a prison service head of OMU services and a senior probation officer head of OMU delivery. The team also comprised seven uniformed offender supervisors and five probation officers.
- 4.13** The new leadership structure had not served to raise the profile of the OMU across the prison and there was not strategic focus on the delivery or quality of offender management work at a senior level. Case administration processes in the OMU were clear and adhered to but neither uniformed offender supervisors nor probation staff were receiving appropriate supervision or quality assurance of their casework by a manager. The only feedback uniformed offender supervisors got was from their probation colleagues who checked and countersigned the OASys assessments they completed.
- 4.14** In our survey, only 46% of prisoners knew they had a custody plan against the comparator of 60%. Too many prisoners did not have a completed OASys and more than 200 were out of

<sup>26</sup> Catch 22 is a social business: a non-profit business with a social mission. It delivered resettlement services at the prison for the contracted CRC.



date. Five of the 12 case files that we examined did not have an up-to-date OASys. Two prisoners had not had an OASys completed since being sentenced in 2017, and one since 2016. About 40 prisoners arrived each month with an out-of-date or no OASys at all. Although the backlog of outstanding assessments had been reduced since the start of 2018, there was no effective strategy to prioritise this work. The quality of the completed assessments completed that we sampled was adequate.

- 4.15** All prisoners were allocated an offender supervisor, usually according to risk. In general, the uniformed offender supervisors were assigned medium- and low-risk prisoners who would be released to the CRC, and probation officers were assigned high-risk prisoners who would be released to the National Probation Service. Caseloads averaged about 75 prisoners.
- 4.16** There was no prescribed minimum frequency of contact in the OMU policy and, with a few exceptions, contact between most offender supervisors and prisoners was inadequate. In too many cases contact was reactive in nature and, after the initial introduction, offender supervisors largely saw prisoners who had applied to see them, regardless of risk or priority. There was little focused offending behaviour work and no evidence that offender supervisors were driving progress against sentence plan targets. There was no evidence of management oversight of levels of contact between offender supervisors and the prisoners on their workload. Most prisoners we spoke to knew who their offender supervisors were but had low expectations of contact with them other than in response to applications. They did not always feel that contact was meaningful or that they were sufficiently supported to progress through the prison system. Most of them did not know what was in their sentence plan.
- 4.17** Home detention curfew (HDC) procedures had been strengthened recently. Eligible prisoners were allowed to apply for the scheme in reasonable time before their earliest date of release. However, some prisoners arrived at Channings Wood close to their eligibility date which delayed the process. In too many cases prisoners experienced delays in release beyond their eligibility date, largely because of a lack of suitable accommodation. Prisoners could request a place in Bail and Support Services (BASS) accommodation. However, there was often a lack of spaces and we were told that some prisoners who had been granted HDC had not been able to take it because BASS accommodation had not been available.

## Recommendations

- 4.18** **The reducing reoffending strategy should be based on an up-to-date needs analysis which includes data from OASys and addresses the needs of significant groups of prisoners within the population.**
- 4.19** **There should be routine oversight of the quality of offender management, including contact levels and case progression.** (Repeated recommendation 4.12)

## Public protection

- 4.20** There were 24 indeterminate sentence prisoners (ISPs): 17 lifers and seven prisoners subject to indeterminate sentences for public protection. Attention was given to parole processes and the timely completion of paperwork, but there was no other specific support for these prisoners. There were no ISP days and they were not prioritised for regular offender supervisor contact. The psychology service was working with some ISP prisoners as part of a national project to enable them to progress through their sentences.

- 4.21** There was an up-to-date public protection policy specific to Channings Wood which covered all areas of work. Arrangements for public protection in relation to visits, mail and telephone monitoring, sexual offences and restraining orders were satisfactory. Initial screening was undertaken on arrival and restrictions were applied appropriately, as were applications for contact with children by prisoners subject to public protection restrictions. A case administrator updated the violent and sexual offenders register (ViSOR) with new arrivals but there was no evidence that this was used for information sharing or risk management.
- 4.22** Interdepartmental risk management (IDRM) meetings chaired by the head of OMU were held monthly. They were well attended and included representation from the police and offender supervisors. The agenda consisted of prisoners who were to be managed at MAPPA levels 2 or 3 (multi-agency public protection arrangements), and those who had caused concern. The number of prisoners discussed was small given the population.
- 4.23** The IDRM meeting did not give sufficient priority to prisoners being released into the community. Too many prisoners who were MAPPA eligible did not have a confirmed management level before release and the prison lacked a robust process to ensure that MAPPA levels were known six months before release. This affected the opportunity for the OMU to participate in multi-agency planning to ensure that risk was adequately addressed before release. If prison representatives were not able to attend MAPPA level 2 meetings, they sent a MAPPA F information sharing document or contributed via telephone conference or video link. Most of the MAPPA Fs that we sampled were completed to a reasonable standard, but provided little analysis of behaviour. The management oversight and countersigning arrangement was not robust enough to ensure that these reports were always completed to a consistently high standard before they were sent out of the prison.

## Categorisation and transfers

- 4.24** Most prisoners were category C, with 25 who were category D. Many of these experienced delays in their progression to an open prison and there was no procedure for escalating transfers for those who had waited for long periods. Six prisoners had been recategorised to B between March and August 2018 and had been transferred much more swiftly. Offender supervisors were responsible for arranging transfers for prisoners who needed to undertake an offending behaviour programme not available at Channings Wood. Categorisation reviews were usually timely, but prisoners were not sufficiently involved in the process. At the time of the inspection, 45 applications for transfer were pending, one of which had been submitted over a month earlier.

## Recommendations

- 4.25 Prisoners should have the opportunity to contribute to their re-categorisation reviews.**
- 4.26 Progressive transfers and transfers to enable sentence plan objectives to be addressed should be timely.**

## Interventions

### Expected outcomes:

#### **Prisoners are able to access interventions designed to promote successful rehabilitation.**

- 4.27** The prison delivered three accredited offending behaviour programmes: Thinking Skills Programme (TSP), designed to address distorted thinking associated with offending; Resolve, which addressed violence; and the Healthy Sex Programme (HSP), a high-intensity programme for men deemed to be at a high risk of reoffending. There was a combined annual target of 60 completions. At the previous inspection the prison had been delivering the sex offender treatment programme which had been withdrawn in early 2017. An alternative intervention, 'Horizon', was to start in January 2019, leaving a gap of almost two years with no on-site intervention for prisoners who had committed a sexual offence. The interim solution was to transfer prisoners when possible to complete appropriate interventions at other prisons (see paragraph 4.24). At the time of the inspection, eight prisoners had been identified for transfer because their release date prevented them from completing Horizon at Channings Wood. The Healthy Sex Programme was delivered one to one over three months. The waiting list and allocation to this intervention was managed nationally.
- 4.28** The programmes team continued to meet and assess all new arrivals during induction and maintained a database which provided an up-to-date picture of the needs of the population. Prisoners were primarily prioritised for programmes based on risk and release dates, but factors such as completing an intervention to move to a therapeutic community were also considered. However, the lack of an OASys assessment continued to delay allocation to an intervention. Prisoners could invite a family member to attend their end of programme review which motivated the participant and encouraged families to be involved in their progression.
- 4.29** Jobcentre Plus staff were on site to help prisoners set up new benefits claims before release and Catch 22 helped prisoners to apply for photographic identification and bank accounts. They also ran modules covering finance and budgeting and disclosure of offences. A specialist money advice service attended the prison twice a month to advise prisoners with finance and external debt issues.
- 4.30** More than half the prisoners in our survey who were within three months of release said they needed help finding accommodation. Figures provided by Catch 22 showed that in the previous six months 12% of prisoners were released without settled accommodation despite efforts on their behalf. A worker from Julian House, a community organisation for prisoners from Devon, was based in the prison twice a week to provide advice to prisoners and liaise between them and housing agencies in Torquay. There were no data on the sustainability of accommodation after release.
- 4.31** The prison continued to support release on temporary licence to aid rehabilitation and preparation for release. It had been used 388 times by 19 prisoners over the previous six months. Approval processes and risk assessments were appropriate.
- 4.32** Support provision for victims of abuse or sex workers had still not been implemented. Prisoners who disclosed that they had been victims of abuse were signposted to services that could support them.

## Recommendation

- 4.33** The number of prisoners helped to obtain and keep suitable accommodation, employment, training and education in the community should be monitored to demonstrate the effectiveness of resettlement work. (Repeated recommendation 4.30)

## Release planning

### Expected outcomes:

**The specific reintegration needs of individual prisoners are met through an individual multi-agency plan to maximise the likelihood of successful reintegration into the community.**

- 4.34** An average of between 50 and 60 prisoners a month had been released over the previous six months. Prisoners were given an appointment with a Catch 22 resettlement caseworker in the last three months of their sentence to review and update their resettlement plan. Some prisoners were seen closer to release when their release date had moved forward to reflect a successful HDC application. Catch 22 had identified this and were starting to see eligible prisoners three months before their HDC dates. Some prisoners had less than three months to serve when they arrived at Channings Wood, which limited their access to some services. For example, it could take six to seven weeks to get a citizen's card (photographic proof of identity). Most resettlement plans covered the key issues, and there was evidence that actions included in the plans were progressed. Plans were completed on OASys assessments and copied to the responsible officer in the community. A weekly multidisciplinary resettlement meeting organised by Catch 22 was a good forum to discuss the prisoners who had been seen that week and to ensure there was shared understanding of the actions needed to support their resettlement.
- 4.35** Arrangements on the day of release were good. After a rub-down search in reception, a manager went through licence requirements with the prisoner, they were given their property, changed into appropriate clothes and were provided with unmarked bags to carry their possessions. There was a good stock of new clothes for prisoners who needed them. Discharge grants were given to eligible prisoners, along with travel warrants or fares to home areas. Transport to the nearest station was also provided.

## Good practice

- 4.36** *The practical support available to prisoners as they prepared to leave Channings Wood, which included access to suitable clothes, bags for property and transport to the nearest station, demonstrated respect for them as they rejoined the community.*

# Section 5. Summary of recommendations and good practice

The following is a listing of repeated and new recommendations and examples of good practice included in this report. The reference numbers at the end of each refer to the paragraph location in the main report, and in the previous report where recommendations have been repeated.

## Main recommendations

### To the governor

- 5.1** The governor should develop a coordinated strategy to improve outcomes across the main measures of safety that is clearly understood by staff at all levels and across all disciplines. The strategy should be led by senior managers and should include clear goals and measures of success and articulate clearly how improvement will be achieved. (S41)
- 5.2** A clear set of standards for daily living that address living conditions, personal standards, behaviour and how individuals conduct themselves towards others should be applied consistently across the prison. Such standards should be modelled pro-socially by managers and staff who should be accountable for improvements. (S42)
- 5.3** The poor structural state of the living blocks should be addressed; windows and broken furniture should be replaced, privacy screens should be installed in showers, buildings should be made waterproof. Prisoner cleaners and painters should have clear job descriptions and their work should be monitored by staff and managers. (S43)
- 5.4** Learning and skills and work activities should be given a significantly higher priority. Staff at all levels should cooperate to promote participation and attendance. Prisoners who do not attend should be challenged. (S44, repeated main recommendation S56)
- 5.5** The process to refer prisoners to the interdepartmental risk management team should be improved to ensure that all high-risk of harm cases due for release are reviewed regularly. MAPPA levels should be confirmed in time for the prison to be fully involved in multi-agency planning for release. (S45)

## Recommendation

### To HMPPS

- 5.6** Progressive transfers and transfers to enable sentence plan objectives to be addressed should be timely. (4.26)

## Recommendations

### To the governor

#### Early days in custody

- 5.7** Vulnerable prisoners should be kept safe during their early days and their experience and induction should be equivalent to their mainstream peers. (1.6)

### Encouraging positive behaviour

- 5.8** All incidents should be reported to ensure that the prison has an accurate picture of drug misuse, violence and self-harm. (1.20)
- 5.9** All prisoners, including vulnerable prisoners, should have access to a full regime. (1.21)

### Managing behaviour

- 5.10** All adjudications, including those referred to the police, should be concluded in a timely manner. (1.24, repeated recommendation 1.38)
- 5.11** A regular adjudication standardisation procedure should be implemented to provide managerial oversight of disciplinary procedures. (1.25)
- 5.12** Oversight of the use of force should be strengthened: reports should be completed, incidents should be filmed and footage viewed to ensure that force is always justified. (1.29)
- 5.13** The closed-circuit television coverage of cells should provide privacy in relation to prisoners' toilet facilities. (1.36, repeated recommendation 1.49)

### Security

- 5.14** The prison should ensure that the MDT and suspicion testing programmes are adequately resourced to undertake all testing within required timescales and in a way that minimises their predictability. (1.45, repeated recommendation 1.32)

### Safeguarding

- 5.15** The prison should produce and implement a comprehensive action plan addressing the underlying causes of self-harm. (1.52)
- 5.16** The management of ACCT processes should be strengthened to ensure that consistent case management improves care and provides activity for prisoners who are struggling to cope. (1.53)

### Staff-prisoner relationships

- 5.17** Staff on living blocks 1,3 and 4 should be out of unit offices providing appropriate supervision of prisoners and challenging poor behaviour. (2.5)

### Daily life

- 5.18** Single cells designed for one prisoner should not be used for two. (2.15, repeated recommendation 2.9)
- 5.19** The main kitchen and wing serveries should be fully equipped. The equipment should be fit for purpose and maintained in good working order. (2.21)

## Equality, diversity and faith

- 5.20** The equality officer should take up post without delay. (2.34)
- 5.21** The equality action plan should be comprehensive and should be monitored regularly by senior managers to ensure that required actions are carried out. (2.35)
- 5.22** Discrimination incident report forms should be freely available on all wings and should be answered promptly by an appropriate manager. (2.36)
- 5.23** Support for foreign national prisoners to help them feel less isolated should be improved, including the use of professional telephone interpreting services and access to a range of translated material. (2.46)
- 5.24** Foreign national prisoners should have regular contact with the Home Office. (2.47)
- 5.25** The equality strategy should address the needs of prisoners under the age of 25, with policies and procedures appropriate to their level of maturity. (2.48)

## Health, well-being and social care

- 5.26** Clinical governance arrangements should deliver effective and safe staffing, robust audit and oversight, regular clinical supervision and a qualitative, well-advertised complaints system which provides timely and clear responses, including how to escalate unresolved concerns. (2.62)
- 5.27** There should be sufficient clinical treatment rooms. (2.63)
- 5.28** The waiting area for vulnerable prisoners should have enough seats and should be safe. (2.64)
- 5.29** The constant watch cell in the health care department should be relocated. (2.65)
- 5.30** A health promotion strategy which includes prisoner involvement should be developed and implemented. (2.67)
- 5.31** All prisoners should receive a secondary health screening. (2.75)
- 5.32** There should be clinical oversight of the appointment system to ensure that patients are appropriately booked in to clinics. (2.76)
- 5.33** Patients with long-term conditions should have individual care plans in place. (2.77)
- 5.34** All prisoners should receive their health information and medication before release. (2.78)
- 5.35** Patients with social care needs should receive consistent care in line with their care plan. (2.82)
- 5.36** Prisoners should receive clear notification of appointments which should take place in appropriate settings, including in the health care department. (2.87)
- 5.37** Dedicated space should be available for the facilitation of group work. (2.88)
- 5.38** Prisoners should receive urgent mental health support during personal crisis, including the provision of professional mental health input at ACCT reviews where appropriate. (2.89)

- 5.39** Prison officers should be trained to identify and support prisoners suspected of being under the influence of illicit drugs. (2.98)
- 5.40** A clear referral pathway should be in place to ensure that all prisoners suspected of being under the influence of illicit drugs are referred to the integrated substance misuse service. (2.99)
- 5.41** The independent prescribing pharmacist's skills should be used to the full to improve patient access and management of long-term conditions. (2.109)
- 5.42** The supervision of queues for collection of medicines should be improved to ensure patient confidentiality and privacy is maintained and the risk of bullying and diversion is limited. (2.110)
- 5.43** Patients leaving the establishment should be supplied with take-out medicines and these should be delivered in a timely manner. (2.111)
- 5.44** Patient group directives should be implemented to enable health care staff to administer a wider range of potent medicines without a prescription. (2.112)

#### Time out of cell

- 5.45** A full regime which starts and finishes on time should be in place for all prisoners. (3.13)
- 5.46** Gym use across different groups should be monitored to ensure equity of access. (3.14, repeated recommendation 3.40)
- 5.47** Showers and toilet facilities in the gym and on the sports field should be fit for use. (3.15, repeated recommendation 3.41)

#### Education, skills and work activities

- 5.48** Senior prison managers should promote education and skills more effectively and should play a more significant part in evaluating the provision and setting challenging targets for improvement. (3.26)
- 5.49** Senior prison managers should improve punctuality and attendance at activities to ensure that prisoners develop a good work ethic and benefit fully from education, training and work. (3.27)
- 5.50** All prisoners should receive good advice and guidance on career progression throughout their sentence. (3.28)
- 5.51** Managers should ensure that the results of prisoners' initial assessment of English and mathematics support needs are routinely used to help plan individual learning. (3.34)
- 5.52** Teachers and trainers should provide clear and unambiguous feedback to prisoners so that they know how to improve. (3.35)
- 5.53** Teachers and trainers should record the development of personal and work skills to ensure that prisoners know what they are good at and what needs to improve. (3.39)
- 5.54** Teachers should improve prisoners' achievements in functional skills. (3.41)



### Children and families and contact with the outside world

- 5.55** Prisoners should have access to parenting and relationship courses. (4.7)
- 5.56** Visits should start at the advertised time for all prisoners. (4.8, repeated recommendation 4.53)

### Reducing risk, rehabilitation and progression

- 5.57** The reducing reoffending strategy should be based on an up-to-date needs analysis which includes data from OASys and addresses the needs of significant groups of prisoners within the population. (4.18)
- 5.58** There should be routine oversight of the quality of offender management, including contact levels and case progression. (4.19, repeated recommendation 4.12)
- 5.59** Prisoners should have the opportunity to contribute to their re-categorisation reviews. (4.25)

### Interventions

- 5.60** The number of prisoners helped to obtain and keep suitable accommodation, employment, training and education in the community should be monitored to demonstrate the effectiveness of resettlement work. (4.33, repeated recommendation 4.30)

### Example of good practice

- 5.61** The practical support available to prisoners as they prepared to leave Channings Wood, which included access to suitable clothes, bags for property and transport to the nearest station, demonstrated respect for them as they rejoined the community. (4.36)



## Section 6. Appendices

### Appendix I: Inspection team

Martin Lomas	Deputy chief inspector
Deborah Butler	Team leader
Ian Dickens	Inspector
Angela Johnson	Inspector
Angus Mulready-Jones	Inspector
Paul Tarbuck	Inspector
Gordon Riach	Inspector
Catherine Shaw	Researcher
Emma Seymour	Researcher
Sharlene Andrew	Researcher
Rachel Duncan	Researcher
Patricia Taflan	Researcher
Steve Eley	Lead health and social care inspector
Dr Elizabeth Walsh	Health and social care inspector
Dayni Johnson	Care Quality Commission inspector
Bob Cowdrey	Ofsted inspector
Lynda Brown	Ofsted inspector
Andy Fitt	Ofsted inspector
Tracey Zimmerman	Ofsted inspector
Yvette Howson	Offender management inspector
David Milner	Offender management inspector



## Appendix II: Progress on recommendations from the last report

The following is a summary of the main findings from the last report and a list of all the recommendations made, organised under the four tests of a healthy prison. The reference numbers at the end of each recommendation refer to the paragraph location in the previous report. If a recommendation has been repeated in the main report, its new paragraph number is also provided. The recommendations in the main body of the report are based on the fifth edition of Expectations, but those below are based on the fourth edition. Their order may therefore differ slightly from the main report.

### Safety

#### **Prisoners, particularly the most vulnerable, are held safely.**

*At the last inspection in 2016, first night arrangements were not sufficiently focused on prisoners' safety but peer workers provided useful support. Levels of violence had increased and prisoners' perceptions of safety had declined but were mostly comparable with those at similar prisons. Arrangements to support prisoners at risk of suicide and self-harm were very poor. There was an uncoordinated approach to security and violence reduction and too little was being done to make the prison safer. Drugs and alcohol were easily available, yet the nature and extent of the problem were not monitored and supply reduction was poorly coordinated. The levels of use of force and segregation were relatively low but oversight was limited. Substance misuse services were good. Outcomes for prisoners were not sufficiently good against this healthy prison test.*

#### **Main recommendations**

The care and case management of those at risk of self-harm should be improved. In particular, risks should be identified and properly assessed, and care plans should be actioned before assessment, care in custody and teamwork (ACCT) documents are closed. (S54)

##### **Not achieved**

The nature and scale of drug abuse should be established and a plan put in place to reduce the availability of prescribed medication, illegal drugs and alcohol. (S55)

##### **Not achieved**

#### **Recommendations**

Prisoners should not be routinely handcuffed between the escort vehicle and reception building. (I.2)

##### **Achieved**

Prisoners' property should not be handled by other prisoners. (I.8)

##### **Achieved**

All new arrivals should have the opportunity to disclose safety and vulnerability issues in a private interview with an officer on their first night. (I.9)

##### **Achieved**

All prisoners in peer mentoring roles should be trained and have regular supervision from staff, to help to clarify and reinforce the limits of their demanding roles. (I.10)

##### **Achieved**

Cells for new arrivals should be prepared and cleaned. (1.11)

**Not achieved**

The level of violence should be reduced through a coordinated action plan. (1.17)

**Not achieved**

The support for victims should be increased and a strategy developed to challenge and manage perpetrators of violence appropriately. (1.18)

**Not achieved**

The prison should implement comprehensive adult safeguarding procedures. (1.24)

**Not achieved**

The prison should ensure that the MDT and suspicion testing programmes are adequately resourced to undertake all testing within required timescales and in a way that minimises their predictability. (1.32)

**Not achieved** (Recommendation repeated, 1.45)

All adjudications, including those referred to the police, should be concluded in a timely manner. (1.38)

**Not achieved** (Recommendation repeated, 1.24)

Force should be used proportionately and as a last resort. Any patterns and trends should be identified and acted upon. (1.42)

**Not achieved**

The underlying reasons for segregation should be explored and addressed, and plans to reintegrate prisoners back to normal location should be put in place where possible. (1.47)

**Achieved**

The environment in the exercise yard should be improved and include seating, and prisoners should be exercised together unless a risk assessment precludes this. (1.48, repeated recommendation 1.62)

**Achieved**

The closed-circuit television coverage of cells should provide privacy in relation to prisoners' toilet facilities. (1.49)

**Not achieved** (Recommendation repeated, 1.36)

Information sharing between the primary health care and substance misuse teams should be consistent, to ensure patient safety. (1.56)

**Achieved**

## Respect

### Prisoners are treated with respect for their human dignity.

*At the last inspection in 2016, external areas were pleasant and well maintained. Prisoners had good access to basic essentials and cells were mostly well equipped but most of the living blocks required substantial renovation. Most prisoners said that staff treated them respectfully but we observed mixed relationships and some poor prisoner behaviour going unchallenged. Diversity and equality arrangements were reasonable and most prisoners with protected characteristics were supported well. Faith provision was underdeveloped. Some aspects of health services required significant improvement. Prisoners were very negative about the food provided. Outcomes for prisoners were not sufficiently good against this healthy prison test.*

### Recommendations

Monitoring data concerning outcomes for prisoners with protected characteristics should be released in a timelier manner from the central performance hub and should be broadened to include all areas relevant to the prison. (2.20)

**Not achieved**

The poor structural state of the living blocks should be addressed and buildings made waterproof. (2.8)

**Not achieved**

Single cells designed for one prisoner should not be used for two. (2.9)

**Not achieved** (Recommendation repeated, 2.15)

Shower areas should be decorated adequately and privacy screens installed. (2.10)

**Not achieved**

All prisoners should be given the option of wearing their own clothes. (2.11)

**Achieved**

Staff should challenge all instances of poor behaviour. (2.14)

**Not achieved**

Support for foreign national prisoners to help them feel less isolated should be improved, including the use of professional telephone interpreting services, access to a range of translated material and regular contact with the Home Office. (2.26)

**Not achieved**

The needs for all prisoners with disabilities should be identified and met, personal emergency evacuation plan process should be standardised and all staff should be aware of prisoners who need help in an emergency. (2.27)

**Achieved**

A range of structured activities should be available for older prisoners. (2.28)

**Not achieved**

All religious services should be led by a member of the chaplaincy. (2.32)

**Achieved**

Responses to complaints should address the issues raised and should be timely. (2.36)

**Achieved**

Data concerning complaints should be monitored and analysed to identify and respond to any trends or patterns. (2.37)

**Achieved**

Prisoners should have access to staff who are trained to provide advice and practical support in pursuing legal matters. (2.41)

**Not achieved**

Prisoners should be able to consult their legal visitors in private. (2.42)

**Achieved**

Clinical governance should be improved, to provide assurances that services are safe and promote continuity of care through good record keeping, reporting and analysis of clinical incidents, effective communication and supervision of staff. (2.55)

**Not achieved**

There should be a separate health care complaints process which is confidential and well advertised, and responses should be timely. (2.56)

**Not achieved**

The waiting area for vulnerable prisoners should be fit for purpose and safe. (2.57)

**Not achieved**

Prisoners with life-long conditions should receive regular reviews which generate an evidence-based care plan from appropriately trained and supervised staff. (2.64)

**Not achieved**

Prisoners should have timely access to all primary care services and to external hospital appointments, to ensure continuity of care and treatment. (2.65)

**Achieved**

All prisoners should receive their medication in an environment that promotes dignity, and all medication should be administered with sufficient supervision to ensure confidentiality and reduce the risk of bullying and diversion. (2.74)

**Not achieved**

Medication dosage times should be therapeutically appropriate. (2.75)

**Not achieved**

Repeat prescription medication should be received in a timely and safe manner to ensure continuity of care. (2.76)

**Not achieved**

In-possession risk assessments should be reviewed regularly and fully recorded before issuing medication in this way. (2.77)

**Achieved**

Prisoners should have access to a full range of support for mild and moderate mental health problems, including more access to psychological interventions and group therapies. (2.86)

**Achieved**

There should be regular and meaningful consultation with prisoners, to address the persistent negative perceptions about the food. (2.93)

**Partially achieved**



Serveries and food trolleys should be thoroughly cleaned immediately after use. (2.94)

**Not achieved**

## Purposeful activity

**Prisoners are able, and expected, to engage in activity that is likely to benefit them.**

*At the last inspection in 2016, a long-standing limited regime and further regular ad hoc restrictions on time unlocked meant that many prisoners had too little time out of cell. There were sufficient learning and skills and work activities for the population but they were poorly used and too few prisoners were purposefully engaged. The range and level of provision were good. The quality of teaching and learning were good and peer mentors were used effectively. Prisoners participating in activities developed good social and work skills, and achievement levels were exceptionally good. Library and PE provision were good. Outcomes for prisoners were not sufficiently good against this healthy prison test.*

### Main recommendation

Learning and skills and work activities should be given a significantly higher priority. Staff at all levels should cooperate to promote participation and attendance at learning and skills and work activities. Prisoners who do not attend should be challenged. (S56)

**Not achieved** (Recommendation repeated, S44)

### Recommendations

The prison should run a regular full category C regime which starts and finishes on time. (3.3)

**Not achieved**

College managers should ensure that teachers make better use of the available computing facilities where these would further enhance the quality of sessions. (3.21)

**Achieved**

Prison managers should ensure that all prisoners arrive promptly and are ready to start work or training activities at the start of sessions. (3.26)

**Not achieved**

Library staff should collate data and information on library usage, to understand better where use needs to be promoted. (3.34)

**Achieved**

Gym use across different groups should be monitored to ensure equity of access. (3.40)

**Not achieved** (Recommendation repeated, 3.14)

Showers and toilet facilities in the gym and on the sports field should be fit for use. (3.41)

**Not achieved** (Recommendation repeated, 3.15)

## Resettlement

**Prisoners are prepared for their release back into the community and effectively helped to reduce the likelihood of reoffending.**

*At the last inspection in 2016, despite a relatively high-risk population, offender management arrangements were weak and undermined by the substantial cross-deployment of offender supervisors. Too little priority was given to offender management in the prison. Many prisoners did not have regular contact with their offender supervisor or an up-to-date offender assessment system (OASys) assessment, which affected their ability to progress and caused considerable frustration. Basic public protection processes were sound. Reintegration planning and support for prisoners across the resettlement pathways were mostly good, but children and families work was underdeveloped. Outcomes for prisoners were not sufficiently good against this healthy prison test.*

### Main recommendation

Offender management work should be given sufficient priority and resources to ensure that prisoners' risks and needs are identified and managed effectively. (S57)

**Not achieved**

### Recommendations

Sufficient escort vehicles should be provided to ensure that transfers are not delayed. (4.22)

**No longer relevant**

The reducing reoffending strategy should be based on a robust and up-to-date needs analysis and fully promote the role of offender management. Oversight should be improved, including a clear action plan against which to hold providers to account. (4.4)

**Not achieved**

The rationale for using release on temporary licence and not transferring category D prisoners to open prisons should be more explicit, evidenced by sentence plan targets and in line with effective risk management. (4.5)

**Achieved**

All risk of harm assessments and plans should be up to date and meaningful. (4.11)

**Not achieved**

There should be routine oversight of the quality of offender management, including contact levels and case progression. (4.12)

**Not achieved** (Recommendation repeated, 4.19)

Recategorisation reviews should be completed on time and involve the prisoner submitting a report to support the progress he has made. (4.21)

**Not achieved**

Transfers to other prisons should be informed by offender supervisors and the sentence plan. (4.23)

**Not achieved**

The number of prisoners helped to obtain and keep suitable accommodation, employment, training and education in the community should be monitored to evidence the effectiveness of resettlement work. (4.30)

**Not achieved** (Recommendation repeated 4.33)

Prison managers should work with the resettlement agencies to collect accurate information about prisoners' employment and training destinations on release, so that they can use this information to support curriculum planning. (4.36)

**Not achieved**

The prison's resettlement agencies should use the virtual campus better to prepare prisoners for their release. (4.37)

**Achieved**

Advice and assistance with debt management should be available. (4.46)

**Achieved**

Provision to encourage and support prisoners to maintain family ties should be improved, including parenting and relationship courses. (4.52)

**Not achieved**

Visits should start at the advertised time. (4.53)

**Not achieved** (Recommendation repeated 4.8)

Subject to security checks, all prisoners should be able to access family and child-centred visits, regardless of their incentives and earned privileges level. (4.54)

**Achieved**



# Appendix III: Care Quality Commission Requirement Notice



## Requirement Notices

**Provider:** Care UK Health & Rehabilitation Services Limited.

**Location:** HMP Channings Wood

**Location ID:** 1-4098563333

**Regulated activities:** Treatment of disease, disorder, or injury, Personal care and Diagnostic and screening.

### Action we have told the provider to take

The table below shows the regulations that were not being met. The provider must send CQC a report that says what action it is going to take to meet these regulations.

**Regulation 9.** Person-centred care of the Health and Social Care Act 2008 (Regulated Activities) 2014.

**9(1)** The care and treatment of service users must – (a) be appropriate, (b) meet their needs and (c) reflect their preferences

**9(3)(a)** carrying out, collaboratively with the relevant person, an assessment of the needs and preferences for care and treatment of the service user;

### How the regulation was not being met:

The provider was not providing care to some service users in line with their treatment needs.

We found three service users with social care needs whose records did not show that they had received the care in accordance with their social care assessments. These service users told us that they were not receiving care in line with their care plans. When we reviewed the records for these service users we found the following gaps in their records:

- Service user A had been assessed as requiring daily care visits. His records showed he did not receive care on 26<sup>th</sup>, 23<sup>rd</sup>, 17<sup>th</sup>, 15<sup>th</sup>, 9<sup>th</sup>, 7<sup>th</sup> 6<sup>th</sup>, 3<sup>rd</sup> and 1<sup>st</sup> August and 12<sup>th</sup> or 14<sup>th</sup> September 2018.

- Service user B had been assessed as requiring daily care visits. Records showed he did not receive care on 9<sup>th</sup>, 6<sup>th</sup>, 4<sup>th</sup>, 3<sup>rd</sup> and 1<sup>st</sup> August 2018, or 10<sup>th</sup> September 2018.
- Service user C had been assessed as requiring a visit twice a week. His records showed he was not provided care between 1<sup>st</sup> August and 19 September 2018.

Records showed that staff did not complete secondary health care screening in line with NHS England guidance. This meant that the healthcare needs of some prisoners may not have been identified or assessed.

During reception screening there was no translation service available. This meant that vulnerable prisoners may not have been able to express their needs and preferences, or understand the services available to them.

**Regulation 12.** Safe care and treatment of the Health and Social Care Act 2008 (Regulated Activities) 2014.

**12(2)(f)** where equipment or medicines are supplied by the service provider, ensuring that there are sufficient quantities of these to ensure the safety of service users and to meet their needs;

**How the regulation was not being met:**

We found some patients were not supplied with their prescribed medicines, which led to delays in their treatment.

Patients told us about experiencing delays in obtaining supplies of repeat medication. Between February and September 2018, staff had recorded 28 incidents of patients' prescribed medications not being available to them.

Staff told us that some patients had not been receiving the medication prescribed for them on release, posing a risk of interruptions in treatment. Between February and September 2018, staff recorded 13 incidents where patients had left the prison without being given their prescribed medications.

**Regulation 17.** Good governance of the Health and Social Care Act 2008 (Regulated Activities) 2014.

**17(1)** Systems or processes must be established and operated effectively to ensure compliance with the requirements in this Part.

**(a)** assess, monitor and improve the quality and safety of the services provided in the carrying on of the regulated activity (including the quality of the experience of service users in receiving those services);

	<p><b>(e)</b> seek and act on feedback from relevant persons and other persons on the services provided in the carrying on of the regulated activity, for the purposes of continually evaluating and improving such services;</p>
<p><b>How the regulation was not being met:</b> Governance systems did not enable effective monitoring and oversight of the quality and safety of the service. We identified risks to quality and safety that had not been identified, or addressed:</p> <p>The provider was not running regular clinics for patients with long-term conditions. There was no regular clinic schedule and we saw that clinics were scheduled according to staff availability. Patients expressed frustrations with accessing healthcare services.</p> <p>Administration staff were booking patients onto the waiting lists for the GP and nurse-led clinics. This meant there was a lack of clinical oversight to enable patients to be prioritised according to their healthcare needs.</p> <p>The planned audit programme was not being adhered to; there were no regular audits being carried out to monitor service quality or safety.</p> <p>The provider had held one patient forum in 2018 and there was no evidence that patient feedback had been used to inform or improve service delivery.</p> <p>We reviewed the complaints logs from February to August 2018, which showed a significant backlog of complaints that had not been reviewed, or responded to. Responses did not always address the concern raised, and there was no information about how the patient could escalate their concerns if they were unhappy with the initial response received.</p>	
<p><b>Regulation 18.</b> Staffing of the Health and Social Care Act 2008 (Regulated Activities) 2014.</p>	<p><b>18(2)</b> Persons employed by the service provider in the provision of a regulated activity must—</p> <p><b>(a )</b> receive such appropriate support, training, professional development, supervision and appraisal as is necessary to enable them to carry out the duties they are employed to perform</p>
<p><b>How the regulation was not being met:</b></p> <p>The supervision log showed that staff had not received regular supervision in line with Care UK's policy.</p>	





## Appendix IV: Prison population profile

Please note: the following figures were supplied by the establishment and any errors are the establishment's own.

### Population breakdown by:

Status	18–20 yr olds	21 and over	%
Sentenced	0	576	86.4
Indeterminate sentence	0	33	4.9
Recall	0	58	8.7
Convicted unsentenced	0	0	0
Remand	0	0	0
Civil prisoners	0	0	0
Detainees	0	0	0
<b>Total</b>	<b>0</b>	<b>667</b>	<b>100</b>

Sentence	18–20 yr olds	21 and over	%
Unsentenced	0	0	0
Less than six months	0	9	1.3
six months to less than 12 months	0	15	2.2
12 months to less than 2 years	0	66	9.9
2 years to less than 4 years	0	202	30.3
4 years to less than 10 years	0	284	42.6
10 years and over (not life)	0	47	7
ISPP (indeterminate sentence for public protection)	0	27	4
Life	0	17	2.5
<b>Total</b>	<b>0</b>	<b>667</b>	<b>100</b>

Age	Number of prisoners	%
Please state minimum age here:	21	-
Under 21 years	0	0
21 years to 29 years	194	29.1
30 years to 39 years	200	30
40 years to 49 years	127	19
50 years to 59 years	88	13.2
60 years to 69 years	37	5.5
70 plus years	21	3.1
Please state maximum age here:	89	-
<b>Total</b>	<b>667</b>	<b>100</b>

Nationality	18–20 yr olds	21 and over	%
British	0	631	94.6
Foreign nationals	0	35	5.2
Not stated	0	1	0.1
<b>Total</b>	<b>0</b>	<b>667</b>	<b>100</b>

<b>Security category</b>	<b>18–20 yr olds</b>	<b>21 and over</b>	<b>%</b>
Uncategorised unsentenced	0	0	0
Uncategorised sentenced	0	0	0
Category A	0	0	0
Category B	0	0	0
Category C	0	642	96.3
Category D	0	25	3.7
Other	0	0	0
<b>Total</b>	<b>0</b>	<b>667</b>	<b>100</b>

<b>Ethnicity</b>	<b>18–20 yr olds</b>	<b>21 and over</b>	<b>%</b>
<b>White</b>			
British	0	558	83.7
Irish	0	6	0.9
Gypsy/Irish Traveller	0	14	2.1
Other white	0	19	2.8
<b>Mixed</b>			
White and black Caribbean	0	6	0.9
White and black African	0	2	0.3
White and Asian	0	0	0
Other mixed	0	6	0.9
<b>Asian or Asian British</b>			
Indian	0	7	1.0
Pakistani	0	3	0.4
Bangladeshi	0	1	0.1
Chinese	0	0	0
Other Asian	0	7	1.0
<b>Black or black British</b>			
Caribbean	0	12	1.8
African	0	17	2.5
Other black	0	5	0.7
<b>Other ethnic group</b>			
Arab	0	3	0.4
Other ethnic group	0	1	0.1
Not stated	0		
<b>Total</b>	<b>0</b>	<b>667</b>	<b>100</b>

<b>Religion</b>	<b>18–20 yr olds</b>	<b>21 and over</b>	<b>%</b>
Baptist	0	3	0.4
Church of England	0	146	21.9
Roman Catholic	0	81	12.1
Other Christian denominations	0	91	13.6
Muslim	0	49	7.3
Sikh	0	1	0.1
Hindu	0	2	0.3
Buddhist	0	19	2.8
Jewish	0	6	0.9
Other	0	0	0
No religion	0	248	37.2
<b>Total</b>	<b>0</b>	<b>667</b>	<b>100</b>

**Sentenced prisoners only**

<b>Length of stay</b>	<b>18–20 yr olds</b>		<b>21 and over</b>	
	<b>Number</b>	<b>%</b>	<b>Number</b>	<b>%</b>
Less than 1 month	0	0	66	9.9
1 month to 3 months	0	0	142	21.3
3 months to six months	0	0	129	19.3
six months to 1 year	0	0	156	23.4
1 year to 2 years	0	0	113	16.9
2 years to 4 years	0	0	50	7.5
4 years or more	0	0	11	1.6
<b>Total</b>	<b>0</b>	<b>0</b>	<b>667</b>	<b>100</b>

**Sentenced prisoners only**

	<b>18–20 yr olds</b>	<b>21 and over</b>	<b>%</b>
Foreign nationals detained post sentence expiry	0	0	0
Public protection cases (this does not refer to public protection sentence categories but cases requiring monitoring/restrictions).	0	0	0
<b>Total</b>	<b>0</b>	<b>0</b>	<b>0</b>

**Unsentenced prisoners only**

<b>Length of stay</b>	<b>18–20 yr olds</b>		<b>21 and over</b>	
	<b>Number</b>	<b>%</b>	<b>Number</b>	<b>%</b>
Less than 1 month	0	0	0	0
1 month to 3 months	0	0	0	0
3 months to six months	0	0	0	0
six months to 1 year	0	0	0	0
1 year to 2 years	0	0	0	0
2 years to 4 years	0	0	0	0
4 years or more	0	0	0	0
<b>Total</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>



## Appendix V: Photographs



Left: Missing window in door, LB I.

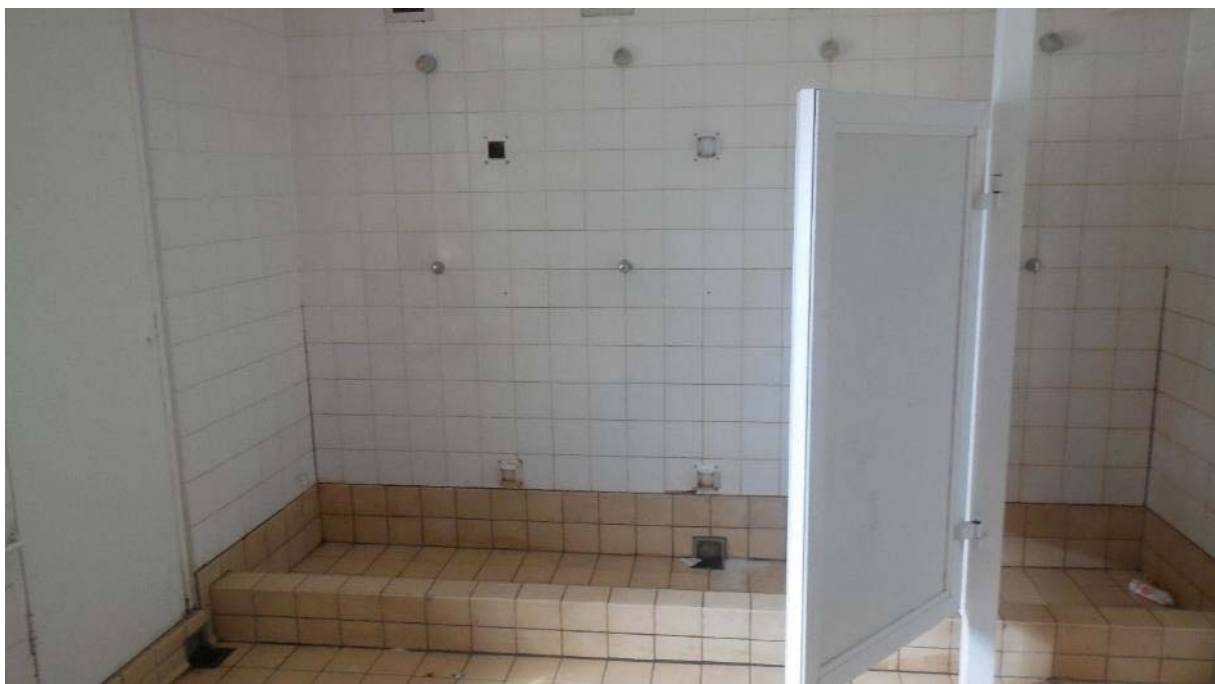


Right: Television hanging from razor wire, LB I.



Left: Damaged sink, LB I.

Below: Damaged and missing shower doors, LB I.





Above: External view of LB 2.

Below: Broken window on LB 8.







# Appendix VI: Prisoner survey methodology and results

## Prisoner survey methodology

A representative survey of prisoners is carried out at the start of every inspection, the results of which contribute to the evidence base for the inspection.

HMIP researchers have developed a self-completion questionnaire to support HMIP Expectations. The questionnaire consists of structured questions covering the prisoner 'journey' from reception to release together with demographic and background questions which enable us to compare responses from different sub-groups of the prisoner population. There are also three open questions at the end of the questionnaire which allow prisoners to express in their own words what they find most positive and negative about the prison<sup>27</sup>.

The questionnaire is available in 14 languages and can also be administered via a telephone interpretation service if necessary.

The questionnaire was revised during 2016-17, in consultation with both inspectors and prisoners. The current version has been in use since September 2017.

## Sampling

On the day of the survey a stratified random sample is drawn by HMIP researchers from a P-NOMIS prisoner population printout ordered by cell location. Using a power calculation, HMIP researchers calculate the minimum sample size required to ensure that the survey findings are representative of the entire population of the establishment.<sup>28</sup>

### Distributing and collecting questionnaires

HMIP researchers distribute and collect the questionnaires in person. So that prisoners can give their informed consent<sup>29</sup> to participate, the purpose of the survey is explained and assurances are given about confidentiality and anonymity. Prisoners are made aware that participation in the survey is voluntary; prisoners who decline to participate are not replaced within the sample. Those who agree to participate are provided with a sealable envelope for their completed questionnaire and told when we will be returning to collect it. We make arrangements to administer the questionnaire via a face-to-face interview for respondents who disclose literacy difficulties.

### Survey response

At the time of the survey on 10 September 2018 the prisoner population at HMP Channings Wood was 675. Using the sampling method described above, questionnaires were distributed to 208 prisoners. We received a total of 178 completed questionnaires, a response rate of 86%. This included one questionnaire completed via face-to-face interview. Sixteen prisoners declined to participate in the survey and 14 questionnaires were either not returned at all, or returned blank.

<sup>27</sup> Qualitative analysis of these written comments is undertaken by HMIP researchers and used by inspectors.

<sup>28</sup> 95% confidence interval with a 7% margin of error. The formula assumes a 75% response rate (65% in open establishments).

<sup>29</sup> For further information about the ethical principles which underpin our survey methodology, please see 'Ethical principles for research activities' which can be downloaded from HMIP's website <http://www.justiceinspectorates.gov.uk/hmiprisons/about-our-inspections/>

## Survey results and analyses

Over the following pages we present the full survey results followed by various comparative analyses for HMP Channings Wood. For the comparator analyses, each question was reformulated into a binary ‘yes/no’ format and affirmative responses compared.<sup>30</sup> Missing responses have been excluded from all analyses and for some questions, responses from a sub-group of the sample are reported (as indicated in the data).

### Full survey results

A full breakdown of responses is provided for every question. Percentages have been rounded and therefore may not add up to 100%.

### Responses from HMP Channings Wood 2018 compared with those from other HMIP surveys<sup>31</sup>

- Survey responses from HMP Channings Wood in 2018 compared with survey responses from the most recent inspection at all other category C training prisons.
- Survey responses from HMP Channings Wood in 2018 compared with survey responses from other category C training prisons inspected since September 2017.
- Survey responses from HMP Channings Wood in 2018 compared with survey responses from HMP Channings Wood in 2016.

### Comparisons between different residential locations within HMP Channings Wood 2018

- responses of prisoners on vulnerable prisoner units (living blocks 1, 5 and 7) compared with those from the rest of the establishment.

### Comparisons between sub-populations of prisoners within HMP Channings Wood 2018<sup>32</sup>

- white prisoners’ responses compared with those of prisoners from black or minority ethnic groups.
- responses of prisoners who reported that they had a disability compared to those who did not.
- responses of prisoners who reported that they had mental health problems compared with those who did not.
- responses of prisoners aged 50 and over compared with those under 50.
- responses of prisoners aged 25 and under compared with those over 25.

Please note that we only carry out within-prison comparator analysis where there are sufficient responses in each sub-group.<sup>33</sup>

In the comparator analyses, statistically significant<sup>34</sup> differences are indicated by shading. Results that are significantly more positive are indicated by green shading and results that are significantly more negative are indicated by blue shading. Orange shading has been used to show a statistically significant difference in demographic or other background details. If there is no shading, any difference between the two results is not statistically significant and may have occurred by chance. Grey shading indicates that there are no valid comparative data for that question.

<sup>30</sup> Using the Chi-square test (or Fisher’s exact test if there are fewer than five responses in a group).

<sup>31</sup> These analyses are carried out on summary data from all survey questions. As we have been using a new version of the questionnaire since September 2017, we do not yet have full comparator data for all questions.

<sup>32</sup> These analyses are carried out on summary data from selected survey questions only.

<sup>33</sup> A minimum of 10 responses which must also represent at least 10% of the total response.

<sup>34</sup> A statistically significant difference between the two samples is one that is unlikely to have arisen by chance alone, and can therefore be assumed to represent a real difference between the two populations. In order to appropriately adjust p-values in light of multiple testing,  $p < 0.01$  is considered statistically significant for all comparisons undertaken. This means there is only a 1% likelihood that the difference is due to chance.

Filtered questions are indented and preceded by an explanation in italics of how the filter has been applied. In the comparator analyses, percentages for filtered questions refer to the number of respondents filtered to that question. For all other questions, percentages refer to the total number of valid responses to the question.

## Survey summary

### Background information

<b>I.1</b>	<b>What wing or houseblock are you currently living on?</b>	
	Houseblock 1 .....	32 (18%)
	Houseblock 2 .....	31 (17%)
	Houseblock 3 .....	20 (11%)
	Houseblock 4 .....	25 (14%)
	Houseblock 5 .....	32 (18%)
	Houseblock 6 .....	9 (5%)
	Houseblock 7 .....	12 (7%)
	Houseblock 8 .....	14 (8%)
	Segregation unit.....	3 (2%)
<b>I.2</b>	<b>How old are you?</b>	
	Under 21 .....	1 (1%)
	21 - 25.....	31 (18%)
	26 - 29.....	30 (17%)
	30 - 39.....	38 (21%)
	40 - 49.....	33 (19%)
	50 - 59.....	31 (18%)
	60 - 69.....	11 (6%)
	70 or over.....	2 (1%)
<b>I.3</b>	<b>What is your ethnic group?</b>	
	White - English/ Welsh/ Scottish/ Northern Irish/ British .....	145 (82%)
	White - Irish.....	3 (2%)
	White - Gypsy or Irish Traveller.....	4 (2%)
	White - any other White background .....	2 (1%)
	Mixed - White and Black Caribbean .....	7 (4%)
	Mixed - White and Black African .....	2 (1%)
	Mixed - White and Asian .....	1 (1%)
	Mixed - any other Mixed ethnic background .....	2 (1%)
	Asian/ Asian British - Indian.....	3 (2%)
	Asian/ Asian British - Pakistani.....	0 (0%)
	Asian/ Asian British - Bangladeshi.....	1 (1%)
	Asian/ Asian British - Chinese.....	0 (0%)
	Asian - any other Asian Background .....	0 (0%)
	Black/ Black British - Caribbean.....	3 (2%)
	Black/ Black British - African .....	3 (2%)
	Black - any other Black/ African/ Caribbean background.....	0 (0%)
	Arab.....	0 (0%)
	Any other ethnic group.....	0 (0%)
<b>I.4</b>	<b>How long have you been in this prison?</b>	
	Less than 6 months.....	59 (34%)
	6 months or more .....	113 (66%)
<b>I.5</b>	<b>Are you currently serving a sentence?</b>	
	Yes .....	159 (90%)
	Yes - on recall.....	17 (10%)
	No - on remand or awaiting sentence.....	1 (1%)
	No - immigration detainee.....	0 (0%)

<b>1.6</b>	<b>How long is your sentence?</b>	
	Less than 6 months.....	2 (1%)
	6 months to less than 1 year.....	9 (5%)
	1 year to less than 4 years.....	65 (37%)
	4 years to less than 10 years.....	71 (41%)
	10 years or more.....	9 (5%)
	IPP (indeterminate sentence for public protection).....	9 (5%)
	Life.....	8 (5%)
	Not currently serving a sentence.....	1 (1%)
<b>Arrival and reception</b>		
<b>2.1</b>	<b>Were you given up-to-date information about this prison before you came here?</b>	
	Yes.....	23 (13%)
	No.....	145 (82%)
	Don't remember.....	8 (5%)
<b>2.2</b>	<b>When you arrived at this prison, how long did you spend in reception?</b>	
	Less than 2 hours.....	71 (40%)
	2 hours or more.....	95 (54%)
	Don't remember.....	10 (6%)
<b>2.3</b>	<b>When you were searched in reception, was this done in a respectful way?</b>	
	Yes.....	145 (83%)
	No.....	19 (11%)
	Don't remember.....	11 (6%)
<b>2.4</b>	<b>Overall, how were you treated in reception?</b>	
	Very well.....	49 (28%)
	Quite well.....	105 (60%)
	Quite badly.....	13 (7%)
	Very badly.....	5 (3%)
	Don't remember.....	3 (2%)
<b>2.5</b>	<b>When you first arrived here, did you have any of the following problems?</b>	
	Problems getting phone numbers.....	43 (25%)
	Contacting family.....	45 (26%)
	Arranging care for children or other dependants.....	4 (2%)
	Contacting employers.....	2 (1%)
	Money worries.....	19 (11%)
	Housing worries.....	25 (14%)
	Feeling depressed.....	64 (37%)
	Feeling suicidal.....	25 (14%)
	Other mental health problems.....	44 (25%)
	Physical health problems.....	28 (16%)
	Drug or alcohol problems (e.g. withdrawal).....	22 (13%)
	Problems getting medication.....	44 (25%)
	Needing protection from other prisoners.....	26 (15%)
	Lost or delayed property.....	40 (23%)
	Other problems.....	16 (9%)
	Did not have any problems.....	39 (22%)
<b>2.6</b>	<b>Did staff help you to deal with these problems when you first arrived?</b>	
	Yes.....	42 (25%)
	No.....	90 (53%)
	Did not have any problems when I first arrived.....	39 (23%)

## First night and induction

### 3.1 Before you were locked up on your first night here, were you offered any of the following things?

Tobacco or nicotine replacement.....	73 (42%)
Toiletries / other basic items .....	73 (42%)
A shower.....	55 (32%)
A free phone call.....	34 (20%)
Something to eat.....	116 (67%)
The chance to see someone from health care .....	95 (55%)
The chance to talk to a Listener or Samaritans.....	40 (23%)
Support from another prisoner (e.g. Insider or buddy).....	33 (19%)
Wasn't offered any of these things .....	16 (9%)

### 3.2 On your first night in this prison, how clean or dirty was your cell?

Very clean .....	9 (5%)
Quite clean .....	54 (31%)
Quite dirty .....	44 (25%)
Very dirty .....	63 (36%)
Don't remember .....	6 (3%)

### 3.3 Did you feel safe on your first night here?

Yes .....	104 (59%)
No.....	67 (38%)
Don't remember .....	4 (2%)

### 3.4 In your first few days here, did you get:

	Yes	No	Don't remember
Access to the prison shop / canteen?	57 (33%)	107 (62%)	8 (5%)
Free PIN phone credit?	37 (22%)	115 (69%)	14 (8%)
Numbers put on your PIN phone?	60 (37%)	87 (53%)	16 (10%)

### 3.5 Did your induction cover everything you needed to know about this prison?

Yes.....	96 (55%)
No.....	69 (39%)
Have not had an induction.....	10 (6%)

## On the wing

### 4.1 Are you in a cell on your own?

Yes.....	144 (81%)
No, I'm in a shared cell or dormitory.....	33 (19%)

### 4.2 Is your cell call bell normally answered within 5 minutes?

Yes.....	59 (33%)
No.....	89 (50%)
Don't know.....	17 (10%)
Don't have a cell call bell.....	12 (7%)

**4.3 Please answer the following questions about the wing or houseblock you are currently living on:**

	Yes	No	Don't know
Do you normally have enough clean, suitable clothes for the week?	115 (66%)	58 (33%)	2 (1%)
Can you shower every day?	158 (91%)	16 (9%)	0 (0%)
Do you have clean sheets every week?	142 (83%)	26 (15%)	4 (2%)
Do you get cell cleaning materials every week?	116 (67%)	56 (32%)	1 (1%)
Is it normally quiet enough for you to relax or sleep at night?	103 (60%)	68 (39%)	2 (1%)
Can you get your stored property if you need it?	58 (34%)	73 (43%)	39 (23%)

**4.4 Normally, how clean or dirty are the communal / shared areas of your wing or houseblock (landings, stairs, wing showers etc.)?**

Very clean .....	32 (18%)
Quite clean .....	66 (38%)
Quite dirty .....	50 (29%)
Very dirty .....	25 (14%)

**Food and canteen**

**5.1 What is the quality of food like in this prison?**

Very good .....	4 (2%)
Quite good .....	35 (20%)
Quite bad .....	63 (36%)
Very bad .....	73 (42%)

**5.2 Do you get enough to eat at mealtimes?**

Always .....	18 (10%)
Most of the time .....	48 (27%)
Some of the time .....	58 (33%)
Never .....	51 (29%)

**5.3 Does the shop / canteen sell the things that you need?**

Yes .....	106 (61%)
No .....	67 (39%)
Don't know .....	1 (1%)

**Relationships with staff**

**6.1 Do most staff here treat you with respect?**

Yes .....	134 (78%)
No .....	38 (22%)

**6.2 Are there any staff here you could turn to if you had a problem?**

Yes .....	136 (78%)
No .....	38 (22%)

**6.3 In the last week, has any member of staff talked to you about how you are getting on?**

Yes .....	51 (29%)
No .....	122 (71%)

<b>6.4</b>	<b>How helpful is your personal or named officer?</b>	
	Very helpful.....	28 (16%)
	Quite helpful.....	29 (17%)
	Not very helpful .....	26 (15%)
	Not at all helpful.....	32 (19%)
	Don't know.....	26 (15%)
	Don't have a personal / named officer .....	31 (18%)
<b>6.5</b>	<b>How often do you see prison governors, directors or senior managers talking to prisoners?</b>	
	Regularly.....	16 (9%)
	Sometimes.....	32 (18%)
	Hardly ever.....	117 (67%)
	Don't know.....	9 (5%)
<b>6.6</b>	<b>Do you feel that you are treated as an individual in this prison?</b>	
	Yes.....	59 (34%)
	No.....	113 (66%)
<b>6.7</b>	<b>Are prisoners here consulted about things like food, canteen, health care or wing issues?</b>	
	Yes, and things sometimes change.....	25 (14%)
	Yes, but things don't change.....	68 (39%)
	No.....	59 (34%)
	Don't know.....	21 (12%)

## Faith

<b>7.1</b>	<b>What is your religion?</b>	
	No religion.....	62 (36%)
	Christian (including Church of England, Catholic, Protestant and all other Christian denominations) .....	82 (47%)
	Buddhist.....	5 (3%)
	Hindu.....	2 (1%)
	Jewish .....	2 (1%)
	Muslim.....	13 (7%)
	Sikh .....	2 (1%)
	Other .....	6 (3%)
<b>7.2</b>	<b>Are your religious beliefs respected here?</b>	
	Yes .....	72 (42%)
	No.....	21 (12%)
	Don't know.....	16 (9%)
	Not applicable (no religion).....	62 (36%)
<b>7.3</b>	<b>Are you able to speak to a Chaplain of your faith in private, if you want to?</b>	
	Yes.....	79 (46%)
	No.....	18 (11%)
	Don't know.....	12 (7%)
	Not applicable (no religion).....	62 (36%)
<b>7.4</b>	<b>Are you able to attend religious services, if you want to?</b>	
	Yes.....	89 (51%)
	No.....	15 (9%)
	Don't know.....	7 (4%)
	Not applicable (no religion).....	62 (36%)



**Contact with family and friends**

<b>8.1</b>	<b>Have staff here encouraged you to keep in touch with your family / friends?</b>	
	Yes .....	38 (22%)
	No .....	136 (78%)
<b>8.2</b>	<b>Have you had any problems with sending or receiving mail (letters or parcels)?</b>	
	Yes .....	79 (46%)
	No .....	91 (54%)
<b>8.3</b>	<b>Are you able to use a phone every day (if you have credit)?</b>	
	Yes .....	148 (87%)
	No .....	23 (13%)
<b>8.4</b>	<b>How easy or difficult is it for your family and friends to get here?</b>	
	Very easy .....	15 (9%)
	Quite easy .....	32 (19%)
	Quite difficult .....	41 (24%)
	Very difficult .....	73 (43%)
	Don't know .....	10 (6%)
<b>8.5</b>	<b>How often do you have visits from family or friends?</b>	
	More than once a week .....	2 (1%)
	About once a week .....	16 (9%)
	Less than once a week .....	84 (50%)
	Not applicable (don't get visits) .....	67 (40%)
<b>8.6</b>	<b>Do visits usually start and finish on time?</b>	
	Yes .....	25 (25%)
	No .....	75 (75%)
<b>8.7</b>	<b>Are your visitors usually treated respectfully by staff?</b>	
	Yes .....	73 (75%)
	No .....	24 (25%)

**Time out of cell**

<b>9.1</b>	<b>Do you know what the unlock and lock-up times are supposed to be here (or roll check times if you are in an open prison)?</b>	
	Yes, and these times are usually kept to .....	67 (39%)
	Yes, but these times are not usually kept to .....	83 (49%)
	No .....	20 (12%)
<b>9.2</b>	<b>How long do you usually spend out of your cell on a typical weekday (including time spent at education, work etc.)?</b>	
	Less than 2 hours .....	24 (14%)
	2 to 6 hours .....	75 (44%)
	6 to 10 hours .....	54 (32%)
	10 hours or more .....	14 (8%)
	Don't know .....	3 (2%)
<b>9.3</b>	<b>How long do you usually spend out of your cell on a typical Saturday or Sunday?</b>	
	Less than 2 hours .....	28 (16%)
	2 to 6 hours .....	105 (61%)
	6 to 10 hours .....	23 (13%)
	10 hours or more .....	11 (6%)
	Don't know .....	4 (2%)

<b>9.4</b>	<b>How many days in a typical week do you have time to do domestics (shower, clean cell, use the wing phones etc.)?</b>		
	None .....	10 (6%)	
	1 or 2 .....	35 (20%)	
	3 to 5.....	24 (14%)	
	More than 5.....	100 (58%)	
	Don't know.....	4 (2%)	
<b>9.5</b>	<b>How many days in a typical week do you get association, if you want it?</b>		
	None .....	8 (5%)	
	1 or 2 .....	24 (14%)	
	3 to 5.....	19 (11%)	
	More than 5.....	109 (64%)	
	Don't know.....	11 (6%)	
<b>9.6</b>	<b>How many days in a typical week could you go outside for exercise, if you wanted to?</b>		
	None .....	9 (5%)	
	1 or 2 .....	18 (10%)	
	3 to 5.....	37 (21%)	
	More than 5.....	102 (59%)	
	Don't know.....	7 (4%)	
<b>9.7</b>	<b>Typically, how often do you go to the gym?</b>		
	Twice a week or more .....	84 (48%)	
	About once a week.....	22 (13%)	
	Less than once a week.....	9 (5%)	
	Never .....	59 (34%)	
<b>9.8</b>	<b>Typically, how often do you go to the library?</b>		
	Twice a week or more .....	18 (10%)	
	About once a week.....	72 (41%)	
	Less than once a week.....	38 (22%)	
	Never .....	47 (27%)	
<b>9.9</b>	<b>Does the library have a wide enough range of materials to meet your needs?</b>		
	Yes .....	87 (51%)	
	No.....	35 (21%)	
	Don't use the library .....	47 (28%)	

### Applications, complaints and legal rights

<b>10.1</b>	<b>Is it easy for you to make an application?</b>			
	Yes .....	133 (76%)		
	No.....	37 (21%)		
	Don't know.....	5 (3%)		
<b>10.2</b>	<b>If you have made any applications here, please answer the questions below:</b>			
		Yes	No	
			Not made any applications	
	Are applications usually dealt with fairly?	92 (57%)	65 (40%)	5 (3%)
	Are applications usually dealt with within 7 days?	64 (39%)	96 (58%)	5 (3%)
<b>10.3</b>	<b>Is it easy for you to make a complaint?</b>			
	Yes .....	93 (53%)		
	No.....	51 (29%)		
	Don't know.....	31 (18%)		

<b>10.4</b>	<b>If you have made any complaints here, please answer the questions below:</b>			
		Yes	No	Not made any complaints
	Are complaints usually dealt with fairly?	30 (19%)	66 (42%)	63 (40%)
	Are complaints usually dealt with within 7 days?	18 (11%)	77 (49%)	63 (40%)
<b>10.5</b>	<b>Have you ever been prevented from making a complaint here when you wanted to?</b>			
	Yes .....			30 (18%)
	No.....			94 (56%)
	Not wanted to make a complaint.....			44 (26%)
<b>10.6</b>	<b>In this prison, is it easy or difficult for you to...</b>			
		Easy	Difficult	Don't know
				Don't need this
	Communicate with your solicitor or legal representative?	44 (26%)	45 (27%)	39 (23%)
	Attend legal visits?	53 (32%)	22 (13%)	50 (30%)
	Get bail information?	14 (9%)	30 (19%)	52 (32%)
				66 (41%)
<b>10.7</b>	<b>Have staff here ever opened letters from your solicitor or legal representative when you were not present?</b>			
	Yes .....			71 (42%)
	No.....			61 (36%)
	Not had any legal letters .....			38 (22%)

## Health care

<b>11.1</b>	<b>How easy or difficult is it to see the following people?</b>					
		Very easy	Quite easy	Quite difficult	Very difficult	Don't know
	Doctor	9 (5%)	29 (17%)	53 (31%)	72 (42%)	9 (5%)
	Nurse	18 (11%)	54 (32%)	45 (27%)	43 (26%)	8 (5%)
	Dentist	3 (2%)	17 (10%)	30 (18%)	94 (57%)	20 (12%)
	Mental health workers	5 (3%)	24 (15%)	23 (14%)	55 (33%)	58 (35%)
<b>11.2</b>	<b>What do you think of the quality of the health service from the following people?</b>					
		Very good	Quite good	Quite bad	Very bad	Don't know
	Doctor	25 (15%)	70 (41%)	27 (16%)	26 (15%)	23 (13%)
	Nurse	23 (14%)	73 (43%)	29 (17%)	27 (16%)	17 (10%)
	Dentist	30 (18%)	36 (22%)	16 (10%)	20 (12%)	65 (39%)
	Mental health workers	18 (11%)	22 (13%)	19 (12%)	25 (15%)	81 (49%)
<b>11.3</b>	<b>Do you have any mental health problems?</b>					
	Yes .....					95 (55%)
	No.....					77 (45%)
<b>11.4</b>	<b>Have you been helped with your mental health problems in this prison?</b>					
	Yes .....					33 (19%)
	No.....					60 (35%)
	Don't have any mental health problems.....					77 (45%)

<b>11.5</b>	<b>What do you think of the overall quality of the health services here?</b>	
	Very good .....	10 (6%)
	Quite good .....	49 (28%)
	Quite bad .....	53 (31%)
	Very bad .....	45 (26%)
	Don't know.....	15 (9%)
<b>Other support needs</b>		
<b>12.1</b>	<b>Do you consider yourself to have a disability (long-term physical, mental or learning needs that affect your day-to-day life)?</b>	
	Yes .....	69 (40%)
	No.....	103 (60%)
<b>12.2</b>	<b>If you have a disability, are you getting the support you need?</b>	
	Yes .....	19 (12%)
	No.....	43 (26%)
	Don't have a disability .....	103 (62%)
<b>12.3</b>	<b>Have you been on an ACCT in this prison?</b>	
	Yes .....	44 (26%)
	No.....	128 (74%)
<b>12.4</b>	<b>If you have been on an ACCT in this prison, did you feel cared for by staff?</b>	
	Yes .....	18 (11%)
	No.....	24 (14%)
	Have not been on an ACCT in this prison.....	128 (75%)
<b>12.5</b>	<b>How easy or difficult is it for you to speak to a Listener, if you need to?</b>	
	Very easy .....	43 (25%)
	Quite easy .....	42 (25%)
	Quite difficult .....	7 (4%)
	Very difficult .....	6 (4%)
	Don't know.....	70 (41%)
	No Listeners at this prison .....	2 (1%)
<b>Alcohol and drugs</b>		
<b>13.1</b>	<b>Did you have an alcohol problem when you came into this prison?</b>	
	Yes .....	30 (17%)
	No.....	142 (83%)
<b>13.2</b>	<b>Have you been helped with your alcohol problem in this prison?</b>	
	Yes .....	17 (10%)
	No.....	13 (8%)
	Did not / do not have an alcohol problem .....	142 (83%)
<b>13.3</b>	<b>Did you have a drug problem when you came into this prison (including illicit drugs and medication not prescribed to you)?</b>	
	Yes .....	52 (30%)
	No.....	120 (70%)
<b>13.4</b>	<b>Have you developed a problem with illicit drugs since you have been in this prison?</b>	
	Yes .....	46 (27%)
	No.....	125 (73%)

<b>13.5</b>	<b>Have you developed a problem with taking medication not prescribed to you since you have been in this prison?</b>	
	Yes .....	21 (12%)
	No.....	151 (88%)
<b>13.6</b>	<b>Have you been helped with your drug problem in this prison (including illicit drugs and medication not prescribed to you)?</b>	
	Yes .....	22 (13%)
	No.....	41 (25%)
	Did not / do not have a drug problem.....	102 (62%)
<b>13.7</b>	<b>Is it easy or difficult to get illicit drugs in this prison?</b>	
	Very easy.....	101 (60%)
	Quite easy.....	27 (16%)
	Quite difficult .....	2 (1%)
	Very difficult .....	3 (2%)
	Don't know.....	36 (21%)
<b>13.8</b>	<b>Is it easy or difficult to get alcohol in this prison?</b>	
	Very easy.....	39 (23%)
	Quite easy.....	42 (25%)
	Quite difficult .....	9 (5%)
	Very difficult .....	12 (7%)
	Don't know.....	69 (40%)

## Safety

<b>14.1</b>	<b>Have you ever felt unsafe here?</b>	
	Yes .....	106 (61%)
	No.....	68 (39%)
<b>14.2</b>	<b>Do you feel unsafe now?</b>	
	Yes .....	56 (33%)
	No.....	113 (67%)
<b>14.3</b>	<b>Have you experienced any of the following types of bullying / victimisation from other prisoners here? (Please tick all that apply to you.)</b>	
	Verbal abuse.....	90 (54%)
	Threats or intimidation.....	82 (49%)
	Physical assault.....	48 (29%)
	Sexual assault.....	3 (2%)
	Theft of canteen or property.....	72 (43%)
	Other bullying / victimisation .....	51 (31%)
	Not experienced any of these from prisoners here.....	52 (31%)
<b>14.4</b>	<b>If you were being bullied / victimised by other prisoners here, would you report it?</b>	
	Yes .....	68 (40%)
	No.....	101 (60%)

<b>14.5</b>	<b>Have you experienced any of the following types of bullying / victimisation from staff here? (Please tick all that apply to you.)</b>	
	Verbal abuse .....	49 (30%)
	Threats or intimidation.....	27 (16%)
	Physical assault.....	11 (7%)
	Sexual assault.....	1 (1%)
	Theft of canteen or property.....	10 (6%)
	Other bullying / victimisation .....	22 (13%)
	Not experienced any of these from staff here.....	107 (65%)

<b>14.6</b>	<b>If you were being bullied / victimised by staff here, would you report it?</b>	
	Yes .....	98 (58%)
	No.....	72 (42%)

### Behaviour management

<b>15.1</b>	<b>Do the incentives or rewards in this prison (e.g. enhanced status) encourage you to behave well?</b>	
	Yes .....	72 (42%)
	No.....	80 (47%)
	Don't know what the incentives / rewards are .....	18 (11%)

<b>15.2</b>	<b>Do you feel you have been treated fairly in the behaviour management scheme (e.g. IEP) in this prison?</b>	
	Yes .....	79 (47%)
	No.....	58 (34%)
	Don't know.....	22 (13%)
	Don't know what this is .....	10 (6%)

<b>15.3</b>	<b>Have you been physically restrained by staff in this prison in the last 6 months?</b>	
	Yes .....	18 (11%)
	No.....	153 (89%)

<b>15.4</b>	<b>If you have been restrained by staff in this prison in the last 6 months, did anyone come and talk to you about it afterwards?</b>	
	Yes .....	2 (1%)
	No.....	14 (8%)
	Don't remember .....	1 (1%)
	Not been restrained here in last 6 months .....	153 (90%)

<b>15.5</b>	<b>Have you spent one or more nights in the segregation unit in this prison in the last 6 months?</b>	
	Yes .....	10 (6%)
	No.....	161 (94%)

<b>15.6</b>	<b>If you have spent one or more nights in the segregation unit in this prison in the last 6 months please answer the questions below:</b>		
		Yes	No
	Were you treated well by segregation staff?	6 (67%)	3 (33%)
	Could you shower every day?	7 (100%)	0 (0%)
	Could you go outside for exercise every day?	6 (86%)	1 (14%)
	Could you use the phone every day (if you had credit)?	6 (86%)	1 (14%)

## Education, skills and work

### 16.1 Is it easy or difficult to get into the following activities in this prison?

	Easy	Difficult	Don't know	Not available here
Education	94 (56%)	41 (25%)	30 (18%)	2 (1%)
Vocational or skills training	66 (41%)	57 (35%)	36 (22%)	2 (1%)
Prison job	102 (62%)	47 (28%)	16 (10%)	0 (0%)
Voluntary work outside of the prison	5 (3%)	44 (28%)	73 (46%)	38 (24%)
Paid work outside of the prison	7 (4%)	36 (22%)	75 (46%)	44 (27%)

### 16.2 If you have done any of these activities while in this prison, do you think they will help you on release?

	Yes, will help	No, won't help	Not done this
Education	66 (42%)	50 (31%)	43 (27%)
Vocational or skills training	60 (41%)	42 (28%)	46 (31%)
Prison job	53 (34%)	86 (54%)	19 (12%)
Voluntary work outside of the prison	30 (20%)	25 (17%)	96 (64%)
Paid work outside of the prison	27 (18%)	24 (16%)	99 (66%)

### 16.3 Do staff encourage you to attend education, training or work?

Yes .....	79 (47%)
No.....	81 (48%)
Not applicable (e.g. if you are retired, sick or on remand) .....	8 (5%)

## Planning and progression

### 17.1 Do you have a custody plan? (This may be called a sentence plan or resettlement plan.)

Yes .....	77 (46%)
No.....	92 (54%)

### 17.2 Do you understand what you need to do to achieve the objectives or targets in your custody plan?

Yes .....	66 (86%)
No.....	6 (8%)
Don't know what my objectives or targets are.....	5 (6%)

### 17.3 Are staff here supporting you to achieve your objectives or targets?

Yes .....	35 (47%)
No.....	35 (47%)
Don't know what my objectives or targets are.....	5 (7%)

### 17.4 If you have done any of the following things in this prison, did they help you to achieve your objectives or targets?

	Yes, this helped	No, this didn't help	Not done / don't know
Offending behaviour programmes	24 (34%)	12 (17%)	34 (49%)
Other programmes	14 (22%)	11 (17%)	40 (62%)
One to one work	19 (28%)	12 (18%)	36 (54%)
Being on a specialist unit	10 (16%)	8 (13%)	46 (72%)
ROTL - day or overnight release	9 (14%)	8 (12%)	49 (74%)

**Preparation for release**

<b>18.1</b>	<b>Do you expect to be released in the next 3 months?</b>			
	Yes .....		44 (26%)	
	No.....		113 (66%)	
	Don't know.....		14 (8%)	
<b>18.2</b>	<b>How close is this prison to your home area or intended release address?</b>			
	Very near.....		9 (20%)	
	Quite near.....		13 (30%)	
	Quite far.....		10 (23%)	
	Very far.....		12 (27%)	
<b>18.3</b>	<b>Is anybody helping you to prepare for your release (e.g. a home probation officer, responsible officer, case worker)?</b>			
	Yes .....		26 (62%)	
	No.....		16 (38%)	
<b>18.4</b>	<b>Are you getting help to sort out the following things for when you are released?</b>			
		Yes, I'm getting help with this	No, but I need help with this	No, and I don't need help with this
	Finding accommodation	9 (21%)	13 (31%)	20 (48%)
	Getting employment	5 (13%)	18 (46%)	16 (41%)
	Setting up education or training	2 (5%)	14 (36%)	23 (59%)
	Arranging benefits	10 (25%)	18 (45%)	12 (30%)
	Sorting out finances	5 (13%)	18 (45%)	17 (43%)
	Support for drug or alcohol problems	7 (18%)	8 (21%)	23 (61%)
	Health / mental health support	8 (21%)	11 (28%)	20 (51%)
	Social care support	1 (3%)	9 (24%)	27 (73%)
	Getting back in touch with family or friends	3 (8%)	14 (36%)	22 (56%)

**More about you**

<b>19.1</b>	<b>Do you have children under the age of 18?</b>		
	Yes .....		67 (39%)
	No.....		104 (61%)
<b>19.2</b>	<b>Are you a UK / British citizen?</b>		
	Yes .....		165(96%)
	No.....		6 (4%)
<b>19.3</b>	<b>Are you from a traveller community (e.g. Gypsy, Roma, Irish Traveller)?</b>		
	Yes .....		7 (4%)
	No.....		163 (96%)
<b>19.4</b>	<b>Have you ever been in the armed services (e.g. army, navy, air force)?</b>		
	Yes .....		18 (11%)
	No.....		153 (89%)
<b>19.5</b>	<b>What is your gender?</b>		
	Male .....		170 (99%)
	Female.....		0 (0%)
	Non-binary.....		1 (1%)
	Other .....		0 (0%)



<b>19.6</b>	<b>How would you describe your sexual orientation?</b>	
	Straight / heterosexual.....	158 (93%)
	Gay / lesbian / homosexual.....	5 (3%)
	Bisexual.....	4 (2%)
	Other.....	2 (1%)
<b>19.7</b>	<b>Do you identify as transgender or transsexual?</b>	
	Yes.....	2 (1%)
	No.....	160 (99%)

### Final questions about this prison

<b>20.1</b>	<b>Do you think your experiences in this prison have made you more or less likely to offend in the future?</b>	
	More likely to offend.....	23 (14%)
	Less likely to offend.....	77 (47%)
	Made no difference.....	63 (39%)

## HMP Channings Wood 2018

### Survey responses compared with those from other HMIP surveys of category C training prisons and with those from the previous survey

In this table summary statistics from HMP Channings Wood 2018 are compared with the following HMIP survey data:

- Summary statistics from most recent surveys of all other category C training prisons (39 prisons). Please note that we do not have comparable data for the new questions introduced in September 2017.
- Summary statistics from surveys of category C training prisons conducted since the introduction of the new questionnaire in September 2017 (10 prisons). Please note that this does not include all category C training prisons.
- Summary statistics from HMP Channings Wood 2018 are compared with those from HMP Channings Wood 2016. Please note that we do not have comparable data for the new questions introduced in September 2017.

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DEMOGRAPHICS AND OTHER BACKGROUND INFORMATION			HMP Channings Wood 2018	All other category C training prisons	HMP Channings Wood 2018	All other category C training prisons surveyed since September 2017	HMP Channings Wood 2018	HMP Channings Wood 2016
			178	6,657	178	1,759	178	176
1.2	Are you under 21 years of age?	<i>n</i> =177	1%	4%	1%	10%	1%	0%
	Are you 25 years of age or younger?	<i>n</i> =177	18%		18%	33%	18%	
	Are you 50 years of age or older?	<i>n</i> =177	25%	17%	25%	10%	25%	24%
	Are you 70 years of age or older?	<i>n</i> =177	1%	2%	1%	1%	1%	4%
1.3	Are you from a minority ethnic group?	<i>n</i> =176	13%	27%	13%	31%	13%	11%
1.4	Have you been in this prison for less than 6 months?	<i>n</i> =172	34%		34%	33%	34%	
1.5	Are you currently serving a sentence?	<i>n</i> =177	99%	100%	99%	100%	99%	100%
	Are you on recall?	<i>n</i> =177	10%	8%	10%	8%	10%	15%
1.6	Is your sentence less than 12 months?	<i>n</i> =174	6%	6%	6%	7%	6%	13%
	Are you here under an indeterminate sentence for public protection (IPP prisoner)?	<i>n</i> =174	5%	7%	5%	3%	5%	3%
7.1	Are you Muslim?	<i>n</i> =174	8%	14%	8%	16%	8%	6%
11.3	Do you have any mental health problems?	<i>n</i> =172	55%		55%	43%	55%	
12.1	Do you consider yourself to have a disability?	<i>n</i> =172	40%	26%	40%	34%	40%	26%
19.1	Do you have any children under the age of 18?	<i>n</i> =171	39%	49%	39%	48%	39%	45%
19.2	Are you a foreign national?	<i>n</i> =171	4%	11%	4%	5%	4%	9%
19.3	Are you from a traveller community? (e.g. Gypsy, Roma, Irish Traveller)	<i>n</i> =170	4%	4%	4%	4%	4%	6%
19.4	Have you ever been in the armed services?	<i>n</i> =171	11%	6%	11%	4%	11%	9%
19.5	Is your gender female or non-binary?	<i>n</i> =171	1%		1%	0%	1%	
19.6	Are you homosexual, bisexual or other sexual orientation?	<i>n</i> =169	7%	4%	7%	4%	7%	8%
19.7	Do you identify as transgender or transsexual?	<i>n</i> =162	1%		1%	1%	1%	
ARRIVAL AND RECEPTION								
2.1	Were you given up-to-date information about this prison before you came here?	<i>n</i> =176	13%		13%	16%	13%	
2.2	When you arrived at this prison, did you spend less than 2 hours in reception?	<i>n</i> =176	40%	55%	40%	46%	40%	48%
2.3	When you were searched in reception, was this done in a respectful way?	<i>n</i> =175	83%	85%	83%	82%	83%	84%
2.4	Overall, were you treated very / quite well in reception?	<i>n</i> =175	88%		88%	85%	88%	

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2.5	When you first arrived, did you have any problems?	<i>n=175</i>	78%	65%	78%	72%	78%	69%
2.5	Did you have problems with:							
	- Getting phone numbers?	<i>n=175</i>	25%	18%	25%	27%	25%	16%
	- Contacting family?	<i>n=175</i>	26%	21%	26%	28%	26%	23%
	- Arranging care for children or other dependents?	<i>n=175</i>	2%		2%	2%	2%	
	- Contacting employers?	<i>n=175</i>	1%	2%	1%	2%	1%	1%
	- Money worries?	<i>n=175</i>	11%	14%	11%	17%	11%	14%
	- Housing worries?	<i>n=175</i>	14%	12%	14%	13%	14%	14%
	- Feeling depressed?	<i>n=175</i>	37%		37%	29%	37%	
	- Feeling suicidal?	<i>n=175</i>	14%		14%	9%	14%	
	- Other mental health problems?	<i>n=175</i>	25%		25%	21%	25%	
	- Physical health problems?	<i>n=175</i>	16%	14%	16%	13%	16%	20%
	- Drugs or alcohol (e.g. withdrawal)?	<i>n=175</i>	13%		13%	12%	13%	
	- Getting medication?	<i>n=175</i>	25%		25%	21%	25%	
	- Needing protection from other prisoners?	<i>n=175</i>	15%	5%	15%	6%	15%	7%
	- Lost or delayed property?	<i>n=175</i>	23%	20%	23%	22%	23%	17%
	<i>For those who had any problems when they first arrived:</i>							
2.6	Did staff help you to deal with these problems?	<i>n=132</i>	32%	35%	32%	31%	32%	40%
<b>FIRST NIGHT AND INDUCTION</b>								
3.1	Before you were locked up on your first night, were you offered:							
	- Tobacco or nicotine replacement?	<i>n=174</i>	42%	68%	42%	71%	42%	41%
	- Toiletries / other basic items?	<i>n=174</i>	42%	52%	42%	53%	42%	51%
	- A shower?	<i>n=174</i>	32%	32%	32%	42%	32%	12%
	- A free phone call?	<i>n=174</i>	20%	42%	20%	47%	20%	15%
	- Something to eat?	<i>n=174</i>	67%	60%	67%	76%	67%	59%
	- The chance to see someone from health care?	<i>n=174</i>	55%	68%	55%	60%	55%	66%
	- The chance to talk to a Listener or Samaritans?	<i>n=174</i>	23%	33%	23%	26%	23%	46%
	- Support from another prisoner (e.g. Insider or buddy)?	<i>n=174</i>	19%		19%	23%	19%	
	- None of these?	<i>n=176</i>	9%		9%	5%	9%	
3.2	On your first night in this prison, was your cell very / quite clean?	<i>n=175</i>	36%		36%	34%	36%	
3.3	Did you feel safe on your first night here?	<i>n=172</i>	59%	78%	59%	74%	59%	76%
3.4	In your first few days here, did you get:							
	- Access to the prison shop / canteen?	<i>n=166</i>	33%	30%	33%	40%	33%	31%
	- Free PIN phone credit?	<i>n=163</i>	22%		22%	48%	22%	
	- Numbers put on your PIN phone?	<i>n=175</i>	37%		37%	47%	37%	
3.5	Have you had an induction at this prison?	<i>n=165</i>	94%	91%	94%	94%	94%	92%
	<i>For those who have had an induction:</i>							
3.5	Did your induction cover everything you needed to know about this prison?	<i>n=177</i>	58%		58%	54%	58%	

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ON THE WING								
4.1	Are you in a cell on your own?	<i>n=177</i>	81%		81%	57%	81%	
4.2	Is your cell call bell normally answered within 5 minutes?	<i>n=177</i>	33%	33%	33%	26%	33%	42%
4.3	On the wing or houseblock you currently live on:							
	- Do you normally have enough clean, suitable clothes for the week?	<i>n=175</i>	66%	69%	66%	66%	66%	61%
	- Can you shower every day?	<i>n=174</i>	91%	87%	91%	87%	91%	84%
	- Do you have clean sheets every week?	<i>n=172</i>	83%	67%	83%	58%	83%	82%
	- Do you get cell cleaning materials every week?	<i>n=173</i>	67%	63%	67%	58%	67%	66%
	- Is it normally quiet enough for you to relax or sleep at night?	<i>n=173</i>	60%	69%	60%	67%	60%	74%
	- Can you get your stored property if you need it?	<i>n=170</i>	34%	25%	34%	25%	34%	25%
4.4	Are the communal / shared areas of your wing or houseblock normally very / quite clean?	<i>n=173</i>	57%		57%	61%	57%	
FOOD AND CANTEEN								
5.1	Is the quality of the food in this prison very / quite good?	<i>n=175</i>	22%		22%	37%	22%	
5.2	Do you get enough to eat at meal-times always / most of the time?	<i>n=175</i>	38%		38%	31%	38%	
5.3	Does the shop / canteen sell the things that you need?	<i>n=174</i>	61%	54%	61%	63%	61%	40%
RELATIONSHIPS WITH STAFF								
6.1	Do most staff here treat you with respect?	<i>n=172</i>	78%	76%	78%	68%	78%	77%
6.2	Are there any staff here you could turn to if you had a problem?	<i>n=174</i>	78%	72%	78%	69%	78%	72%
6.3	In the last week, has any member of staff talked to you about how you are getting on?	<i>n=173</i>	30%	30%	30%	28%	30%	20%
6.4	Do you have a personal officer?	<i>n=172</i>	82%		82%	81%	82%	
<i>For those who have a personal officer:</i>								
6.4	Is your personal or named officer very / quite helpful?	<i>n=141</i>	40%		40%	42%	40%	
6.5	Do you regularly see prison governors, directors or senior managers talking to prisoners?	<i>n=174</i>	9%		9%	9%	9%	
6.6	Do you feel that you are treated as an individual in this prison?	<i>n=172</i>	34%		34%	42%	34%	
6.7	Are prisoners here consulted about things like food, canteen, health care or wing issues?	<i>n=173</i>	54%		54%	50%	54%	
	If so, do things sometimes change?	<i>n=93</i>	27%		27%	31%	27%	
FAITH								
7.1	Do you have a religion?	<i>n=174</i>	64%	70%	64%	66%	64%	59%
<i>For those who have a religion:</i>								
7.2	Are your religious beliefs respected here?	<i>n=109</i>	66%		66%	69%	66%	
7.3	Are you able to speak to a Chaplain of your faith in private, if you want to?	<i>n=109</i>	73%		73%	70%	73%	
7.4	Are you able to attend religious services, if you want to?	<i>n=111</i>	80%		80%	88%	80%	

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HMP Channings Wood 2018	HMP Channings Wood 2016
178	176

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CONTACT WITH FAMILY AND FRIENDS			
8.1	Have staff here encouraged you to keep in touch with your family / friends?	n=174	22%
8.2	Have you had any problems with sending or receiving mail (letters or parcels)?	n=170	47% 46%
8.3	Are you able to use a phone every day (if you have credit)?	n=171	87%
8.4	Is it very / quite easy for your family and friends to get here?	n=171	28%
8.5	Do you get visits from family/friends once a week or more?	n=169	11%
<i>For those who get visits:</i>			
8.6	Do visits usually start and finish on time?	n=100	25%
8.7	Are your visitors usually treated respectfully by staff?	n=97	75%
TIME OUT OF CELL			
9.1	Do you know what the unlock and lock-up times are supposed to be here?	n=170	88%
<i>For those who know what the unlock and lock-up times are supposed to be:</i>			
9.1	Are these times usually kept to?	n=150	45%
9.2	Do you usually spend less than 2 hours out of your cell on a typical weekday?	n=170	14% 13%
	Do you usually spend 10 hours or more out of your cell on a typical weekday?	n=170	8% 15%
9.3	Do you usually spend less than 2 hours out of your cell on a typical Saturday or Sunday?	n=171	16%
	Do you usually spend 10 hours or more out of your cell on a typical Saturday or Sunday?	n=171	6%
9.4	Do you have time to do domestics more than 5 days in a typical week?	n=173	58%
9.5	Do you get association more than 5 days in a typical week, if you want it?	n=171	64%
9.6	Could you go outside for exercise more than 5 days in a typical week, if you wanted to?	n=173	59%
9.7	Do you typically go to the gym twice a week or more?	n=174	48%
9.8	Do you typically go to the library once a week or more?	n=175	51% 44%
<i>For those who use the library:</i>			
9.9	Does the library have a wide enough range of materials to meet your needs?	n=122	71% 60%
APPLICATIONS, COMPLAINTS AND LEGAL RIGHTS			
10.1	Is it easy for you to make an application?	n=175	76% 79%
<i>For those who have made an application:</i>			
10.2	Are applications usually dealt with fairly?	n=157	59% 56%
	Are applications usually dealt with within 7 days?	n=160	40% 39%
10.3	Is it easy for you to make a complaint?	n=175	53% 59%
<i>For those who have made a complaint:</i>			
10.4	Are complaints usually dealt with fairly?	n=96	31% 32%
	Are complaints usually dealt with within 7 days?	n=95	19% 27%
10.5	Have you ever been prevented from making a complaint here when you wanted to?	n=124	24%

22%	26%
47%	60%
87%	85%
28%	39%
11%	17%
25%	51%
75%	74%
88%	91%
45%	54%
14%	20%
8%	8%
16%	24%
6%	3%
58%	53%
64%	61%
59%	65%
48%	50%
51%	44%
71%	56%
76%	72%
59%	51%
40%	36%
53%	62%
31%	30%
19%	26%
24%	28%

22%	
47%	38%
87%	
28%	
11%	
25%	
75%	
88%	
45%	
14%	18%
8%	10%
16%	
6%	
58%	
64%	
59%	
48%	
51%	50%
71%	81%
76%	81%
59%	63%
40%	41%
53%	51%
31%	26%
19%	17%
24%	

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<i>For those who need it, is it easy to:</i>									
10.6	Communicate with your solicitor or legal representative?	n=128	34%		34%	37%	34%		
	Attend legal visits?	n=125	42%		42%	48%	42%		
	Get bail information?	n=96	15%		15%	15%	15%		
<i>For those who have had legal letters:</i>									
10.7	Have staff here ever opened letters from your solicitor or legal representative when you were not present?	n=132	54%	50%	54%	56%	54%	50%	
<b>HEALTH CARE</b>									
11.1	Is it very / quite easy to see:								
	- Doctor?	n=172	22%		22%	31%	22%		
	- Nurse?	n=168	43%		43%	52%	43%		
	- Dentist?	n=164	12%		12%	16%	12%		
11.2	Do you think the quality of the health service is very / quite good from:								
	- Doctor?	n=171	56%		56%	44%	56%		
	- Nurse?	n=169	57%		57%	56%	57%		
	- Dentist?	n=167	40%		40%	33%	40%		
11.3	Do you have any mental health problems?	n=172	55%		55%	43%	55%		
	<i>For those who have mental health problems:</i>								
	11.4	Have you been helped with your mental health problems in this prison?	n=93	36%		36%	42%	36%	
	11.5	Do you think the overall quality of the health services here is very / quite good?	n=172	34%		34%	42%	34%	
<b>OTHER SUPPORT NEEDS</b>									
12.1	Do you consider yourself to have a disability?	n=172	40%	26%	40%	34%	40%	26%	
<i>For those who have a disability:</i>									
12.2	Are you getting the support you need?	n=62	31%		31%	33%	31%		
12.3	Have you been on an ACCT in this prison?	n=172	26%		26%	15%	26%		
<i>For those who have been on an ACCT:</i>									
12.4	Did you feel cared for by staff?	n=42	43%		43%	44%	43%		
12.5	Is it very / quite easy for you to speak to a Listener if you need to?	n=170	50%		50%	40%	50%		
<b>ALCOHOL AND DRUGS</b>									
13.1	Did you have an alcohol problem when you came into this prison?	n=172	17%	15%	17%	14%	17%	22%	
<i>For those who had / have an alcohol problem:</i>									
13.2	Have you been helped with your alcohol problem in this prison?	n=30	57%	60%	57%	51%	57%	64%	
13.3	Did you have a drug problem when you came into this prison (including illicit drugs and medication not prescribed to you)?	n=172	30%	25%	30%	28%	30%	32%	
13.4	Have you developed a problem with illicit drugs since you have been in this prison?	n=171	27%	13%	27%	17%	27%	16%	
13.5	Have you developed a problem with taking medication not prescribed to you since you have been in this prison?	n=172	12%		12%	11%	12%		
<i>For those who had / have a drug problem:</i>									
13.6	Have you been helped with your drug problem in this prison?	n=63	35%	57%	35%	46%	35%	64%	
13.7	Is it very / quite easy to get illicit drugs in this prison?	n=169	76%		76%	49%	76%		
13.8	Is it very / quite easy to get alcohol in this prison?	n=171	47%		47%	32%	47%		

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SAFETY								
14.1	Have you ever felt unsafe here?	n=174	61%	42%	61%	45%	61%	44%
14.2	Do you feel unsafe now?	n=169	33%	19%	33%	21%	33%	14%
14.3	Have you experienced any of the following from other prisoners here:							
	- Verbal abuse?	n=167	54%		54%	33%	54%	
	- Threats or intimidation?	n=167	49%		49%	29%	49%	
	- Physical assault?	n=167	29%		29%	16%	29%	
	- Sexual assault?	n=167	2%		2%	2%	2%	
	- Theft of canteen or property?	n=167	43%		43%	24%	43%	
	- Other bullying / victimisation?	n=167	31%		31%	15%	31%	
	- Not experienced any of these from prisoners here	n=167	31%		31%	56%	31%	
14.4	If you were being bullied / victimised by other prisoners here, would you report it?	n=169	40%		40%	31%	40%	
14.5	Have you experienced any of the following from staff here:							
	- Verbal abuse?	n=165	30%		30%	32%	30%	
	- Threats or intimidation?	n=165	16%		16%	24%	16%	
	- Physical assault?	n=165	7%		7%	10%	7%	
	- Sexual assault?	n=165	1%		1%	2%	1%	
	- Theft of canteen or property?	n=165	6%		6%	8%	6%	
	- Other bullying / victimisation?	n=165	13%		13%	16%	13%	
	- Not experienced any of these from staff here	n=165	65%		65%	57%	65%	
14.6	If you were being bullied / victimised by staff here, would you report it?	n=170	58%		58%	48%	58%	
BEHAVIOUR MANAGEMENT								
15.1	Do the incentives or rewards in this prison (e.g. enhanced status) encourage you to behave well?	n=170	42%		42%	39%	42%	
15.2	Do you feel you have been treated fairly in the behaviour management scheme (e.g. IEP) in this prison?	n=169	47%		47%	36%	47%	
15.3	Have you been physically restrained by staff in this prison, in the last 6 months?	n=171	11%	10%	11%	13%	11%	8%
<i>For those who have been restrained in the last 6 months:</i>								
15.4	Did anyone come and talk to you about it afterwards?	n=17	12%		12%	19%	12%	
15.5	Have you spent one or more nights in the segregation unit in this prison in the last 6 months?	n=171	6%		6%	10%	6%	
<i>For those who have spent one or more nights in the segregation unit in the last 6 months:</i>								
15.6	Were you treated well by segregation staff?	n=9	67%		67%	57%	67%	
	Could you shower every day?	n=7	100%		100%	77%	100%	
	Could you go outside for exercise every day?	n=7	86%		86%	79%	86%	
	Could you use the phone every day (if you had credit)?	n=7	86%		86%	63%	86%	

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\* less than 1% probability that the difference is due to chance

Number of completed questionnaires returned

n=number of valid responses to question (HMP Channings Wood 2018)

HMP Channings Wood 2018	All other category C training prisons	HMP Channings Wood 2018	All other category C training prisons surveyed since September 2017	HMP Channings Wood 2018	HMP Channings Wood 2016
178	6,657	178	1,759	178	176

EDUCATION, SKILLS AND WORK							
16.1	In this prison, is it easy to get into the following activities:						
	- Education?	n=167	56%		56%	56%	
	- Vocational or skills training?	n=161	41%		41%	38%	41%
	- Prison job?	n=165	62%		62%	40%	62%
	- Voluntary work outside of the prison?	n=160	3%		3%	4%	3%
	- Paid work outside of the prison?	n=162	4%		4%	3%	4%
16.2	In this prison, have you done the following activities:						
	- Education?	n=159	73%	81%	73%	79%	73%
	- Vocational or skills training?	n=148	69%	74%	69%	67%	69%
	- Prison job?	n=158	88%	84%	88%	78%	88%
	- Voluntary work outside of the prison?	n=151	36%		36%	31%	36%
	- Paid work outside of the prison?	n=150	34%		34%	31%	34%
<i>For those who have done the following activities, do you think they will help you on release:</i>							
	- Education?	n=116	57%	58%	57%	61%	57%
	- Vocational or skills training?	n=102	59%	60%	59%	69%	59%
	- Prison job?	n=139	38%	43%	38%	41%	38%
	- Voluntary work outside of the prison?	n=55	55%		55%	56%	55%
	- Paid work outside of the prison?	n=51	53%		53%	61%	53%
16.3	Do staff encourage you to attend education, training or work?		n=160	49%	49%	56%	49%
PLANNING AND PROGRESSION							
17.1	Do you have a custody plan?		n=149	46%	46%	60%	46%
<i>For those who have a custody plan:</i>							
17.2	Do you understand what you need to do to achieve your objectives or targets?		n=77	86%	86%	83%	86%
17.3	Are staff helping you to achieve your objectives or targets?		n=75	47%	47%	41%	47%
17.4	In this prison, have you done:						
	- Offending behaviour programmes?	n=70	51%		51%	46%	51%
	- Other programmes?	n=65	39%		39%	40%	39%
	- One to one work?	n=67	46%		46%	34%	46%
	- Been on a specialist unit?	n=64	28%		28%	17%	28%
	- ROTL - day or overnight release?	n=66	26%		26%	11%	26%
<i>For those who have done the following, did they help you to achieve your objectives or targets:</i>							
	- Offending behaviour programmes?	n=36	67%		67%	70%	67%
	- Other programmes?	n=25	56%		56%	66%	56%
	- One to one work?	n=31	61%		61%	68%	61%
	- Being on a specialist unit?	n=18	56%		56%	48%	56%
	- ROTL - day or overnight release?	n=17	53%		53%	34%	53%



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Number of completed questionnaires returned

*n*=number of valid responses to question (HMP Channings Wood 2018)

HMP Channings Wood 2018	All other category C training prisons	HMP Channings Wood 2018	All other category C training prisons surveyed since September 2017	HMP Channings Wood 2018	HMP Channings Wood 2016
178	6,657	178	1,759	178	176

PREPARATION FOR RELEASE								
18.1	Do you expect to be released in the next 3 months?	<i>n</i> =171	26%		26%	25%	26%	
<i>For those who expect to be released in the next 3 months:</i>								
18.2	Is this prison very / quite near to your home area or intended release address?	<i>n</i> =44	50%		50%	45%	50%	
18.3	Is anybody helping you to prepare for your release?	<i>n</i> =42	62%		62%	59%	62%	
18.4	Do you need help to sort out the following for when you are released:							
	- Finding accommodation?	<i>n</i> =42	52%		52%	62%	52%	
	- Getting employment?	<i>n</i> =39	59%		59%	62%	59%	
	- Setting up education or training?	<i>n</i> =39	41%		41%	49%	41%	
	- Arranging benefits?	<i>n</i> =40	70%		70%	66%	70%	
	- Sorting out finances?	<i>n</i> =40	58%		58%	56%	58%	
	- Support for drug or alcohol problems?	<i>n</i> =38	40%		40%	43%	40%	
	- Health / mental Health support?	<i>n</i> =39	49%		49%	49%	49%	
	- Social care support?	<i>n</i> =37	27%		27%	36%	27%	
	- Getting back in touch with family or friends?	<i>n</i> =39	44%		44%	40%	44%	
18.4	Are you getting help to sort out the following for when you are released, if you need it:							
	- Finding accommodation?	<i>n</i> =22	41%		41%	36%	41%	
	- Getting employment?	<i>n</i> =23	22%		22%	23%	22%	
	- Setting up education or training?	<i>n</i> =16	13%		13%	26%	13%	
	- Arranging benefits?	<i>n</i> =28	36%		36%	26%	36%	
	- Sorting out finances?	<i>n</i> =23	22%		22%	23%	22%	
	- Support for drug or alcohol problems?	<i>n</i> =15	47%		47%	50%	47%	
	- Health / mental Health support?	<i>n</i> =19	42%		42%	29%	42%	
	- Social care support?	<i>n</i> =10	10%		10%	24%	10%	
	- Getting back in touch with family or friends?	<i>n</i> =17	18%		18%	33%	18%	
<b>FINAL QUESTION ABOUT THIS PRISON</b>								
20.1	Do you think your experiences in this prison have made you less likely to offend in the future?	<i>n</i> =163	47%		47%	51%	47%	

## HMP Channings Wood 2018

### Comparison of survey responses between sub-populations of prisoners

In this table the following analyses are presented:  
 - responses of prisoners from black and minority ethnic groups are compared with those of white prisoners  
 Please note that these analyses are based on summary data from selected survey questions only.

Shading is used to indicate statistical significance\*, as follows:

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**Number of completed questionnaires returned**

Black and minority ethnic	
White	
	22    154

DEMOGRAPHICS AND OTHER BACKGROUND INFORMATION			
1.2	Are you under 21 years of age?	0%	1%
	Are you 50 years of age or older?	5%	28%
1.3	Are you from a minority ethnic group?		
7.1	Are you Muslim?	41%	3%
11.3	Do you have any mental health problems?	57%	55%
12.1	Do you consider yourself to have a disability?	27%	42%
19.2	Are you a foreign national?	5%	3%
19.3	Are you from a traveller community? (e.g. Gypsy, Roma, Irish Traveller)	0%	5%
ARRIVAL AND RECEPTION			
2.3	When you were searched in reception, was this done in a respectful way?	82%	83%
2.4	Overall, were you treated very / quite well in reception?	91%	88%
2.5	When you first arrived, did you have any problems?	91%	76%
<i>For those who had any problems when they first arrived:</i>			
2.6	Did staff help you to deal with these problems?	26%	33%
FIRST NIGHT AND INDUCTION			
3.3	Did you feel safe on your first night here?	55%	60%
3.5	Have you had an induction at this prison?	91%	95%
<i>For those who have had an induction:</i>			
3.5	Did your induction cover everything you needed to know about this prison?	35%	61%
ON THE WING			
4.2	Is your cell call bell normally answered within 5 minutes?	27%	34%
4.3	On the wing or houseblock you currently live on:		
	- Do you normally have enough clean, suitable clothes for the week?	50%	68%
	- Can you shower every day?	86%	91%
	- Do you have clean sheets every week?	68%	85%
	- Do you get cell cleaning materials every week?	59%	68%
	- Is it normally quiet enough for you to relax or sleep at night?	50%	61%
	- Can you get your stored property if you need it?	9%	37%

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Black and minority ethnic	White
<b>22</b>	<b>154</b>

Number of completed questionnaires returned

<b>FOOD AND CANTEEN</b>			
5.2	Do you get enough to eat at meal-times always / most of the time?	<b>18%</b>	<b>40%</b>
5.3	Does the shop / canteen sell the things that you need?	<b>48%</b>	<b>63%</b>
<b>RELATIONSHIPS WITH STAFF</b>			
6.1	Do most staff here treat you with respect?	<b>67%</b>	<b>79%</b>
6.2	Are there any staff here you could turn to if you had a problem?	<b>73%</b>	<b>79%</b>
6.3	In the last week, has any member of staff talked to you about how you are getting on?	<b>32%</b>	<b>29%</b>
6.6	Do you feel that you are treated as an individual in this prison?	<b>29%</b>	<b>35%</b>
<b>FAITH</b>			
<i>For those who have a religion:</i>			
7.2	Are your religious beliefs respected here?	<b>33%</b>	<b>73%</b>
7.3	Are you able to speak to a Chaplain of your faith in private, if you want to?	<b>44%</b>	<b>78%</b>
<b>CONTACT WITH FAMILY AND FRIENDS</b>			
8.1	Have staff here encouraged you to keep in touch with your family / friends?	<b>23%</b>	<b>21%</b>
8.2	Have you had any problems with sending or receiving mail (letters or parcels)?	<b>46%</b>	<b>47%</b>
8.3	Are you able to use a phone every day (if you have credit)?	<b>71%</b>	<b>89%</b>
<i>For those who get visits:</i>			
8.7	Are your visitors usually treated respectfully by staff?	<b>55%</b>	<b>78%</b>
<b>TIME OUT OF CELL</b>			
9.2	Do you usually spend less than 2 hours out of your cell on a typical weekday?	<b>10%</b>	<b>15%</b>
	Do you usually spend 10 hours or more out of your cell on a typical weekday?	<b>0%</b>	<b>10%</b>
<i>For those who use the library:</i>			
9.9	Does the library have a wide enough range of materials to meet your needs?	<b>50%</b>	<b>74%</b>
<b>APPLICATIONS, COMPLAINTS AND LEGAL RIGHTS</b>			
10.1	Is it easy for you to make an application?	<b>64%</b>	<b>78%</b>
<i>For those who have made an application:</i>			
10.2	Are applications usually dealt with fairly?	<b>32%</b>	<b>62%</b>
10.3	Is it easy for you to make a complaint?	<b>32%</b>	<b>56%</b>
<i>For those who have made a complaint:</i>			
10.4	Are complaints usually dealt with fairly?	<b>0%</b>	<b>37%</b>
10.5	Have you ever been prevented from making a complaint here when you wanted to?	<b>33%</b>	<b>23%</b>

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Black and minority ethnic	White
<b>22</b>	<b>154</b>

Number of completed questionnaires returned

HEALTH CARE			
11.1	Is it very / quite easy to see:		
	- Doctor?	14%	23%
	- Nurse?	43%	43%
	- Dentist?	0%	14%
	- Mental health workers?	5%	19%
<i>For those who have mental health problems:</i>			
11.4	Have you been helped with your mental health problems in this prison?	42%	35%
11.5	Do you think the overall quality of the health services here is very / quite good?	14%	37%
OTHER SUPPORT NEEDS			
<i>For those who have a disability:</i>			
12.2	Are you getting the support you need?	25%	31%
SAFETY			
14.1	Have you ever felt unsafe here?	73%	59%
14.2	Do you feel unsafe now?	57%	30%
14.3	Not experienced bullying / victimisation by other prisoners	33%	31%
14.4	If you were being bullied / victimised by other prisoners here, would you report it?	29%	42%
14.5	Not experienced bullying / victimisation by members of staff	45%	68%
14.6	If you were being bullied / victimised by staff here, would you report it?	43%	60%
BEHAVIOUR MANAGEMENT			
15.1	Do the incentives or rewards in this prison (e.g. enhanced status) encourage you to behave well?	19%	46%
15.2	Do you feel you have been treated fairly in the behaviour management scheme (e.g. IEP) in this prison?	24%	50%
15.3	Have you been physically restrained by staff in this prison, in the last 6 months?	14%	10%
15.5	Have you spent one or more nights in the segregation unit in this prison in the last 6 months?	10%	5%
EDUCATION, SKILLS AND WORK			
16.3	Do staff encourage you to attend education, training or work?	40%	51%
PLANNING AND PROGRESSION			
17.1	Do you have a custody plan?	43%	46%
<i>For those who have a custody plan:</i>			
17.3	Are staff helping you to achieve your objectives or targets?	33%	48%
PREPARATION FOR RELEASE			
<i>For those who expect to be released in the next 3 months:</i>			
18.3	Is anybody helping you to prepare for your release?	25%	66%
FINAL QUESTION ABOUT THIS PRISON			
20.1	Do you think your experiences in this prison have made you less likely to offend in the future?	30%	50%

## HMP Channings Wood 2018

### Comparison of survey responses between sub-populations of prisoners

In this table the following analyses are presented:

- responses of prisoners who reported that they had a disability compared with those who did not.
- responses of prisoners who reported that they had mental health problems compared with those who did not.

Please note that these analyses are based on summary data from selected survey questions only.

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Number of completed questionnaires returned

		Have a disability		Do not have a disability		Mental health problems	No mental health problems
		<b>69</b>		<b>103</b>		<b>95</b>	<b>77</b>

DEMOGRAPHICS AND OTHER BACKGROUND INFORMATION							
1.2	Are you under 21 years of age?	0%	1%	1%	0%		
	Are you 50 years of age or older?	20%	28%	14%	39%		
1.3	Are you from a minority ethnic group?	9%	16%	13%	12%		
7.1	Are you Muslim?	8%	8%	5%	11%		
11.3	Do you have any mental health problems?	85%	34%				
12.1	Do you consider yourself to have a disability?			62%	13%		
19.2	Are you a foreign national?	2%	5%	1%	7%		
19.3	Are you from a traveller community? (e.g. Gypsy, Roma, Irish Traveller)	6%	3%	5%	3%		
ARRIVAL AND RECEPTION							
2.3	When you were searched in reception, was this done in a respectful way?	81%	84%	80%	87%		
2.4	Overall, were you treated very / quite well in reception?	84%	90%	84%	92%		
2.5	When you first arrived, did you have any problems?	90%	69%	92%	61%		
<i>For those who had any problems when they first arrived:</i>							
2.6	Did staff help you to deal with these problems?	35%	29%	30%	35%		
FIRST NIGHT AND INDUCTION							
3.3	Did you feel safe on your first night here?	53%	62%	54%	65%		
3.5	Have you had an induction at this prison?	96%	94%	95%	94%		
<i>For those who have had an induction:</i>							
3.5	Did your induction cover everything you needed to know about this prison?	55%	60%	55%	61%		
ON THE WING							
4.2	Is your cell call bell normally answered within 5 minutes?	32%	34%	28%	40%		
4.3	On the wing or houseblock you currently live on:						
	- Do you normally have enough clean, suitable clothes for the week?	66%	66%	63%	70%		
	- Can you shower every day?	88%	94%	90%	92%		
	- Do you have clean sheets every week?	82%	84%	77%	89%		
	- Do you get cell cleaning materials every week?	66%	67%	66%	68%		
	- Is it normally quiet enough for you to relax or sleep at night?	54%	63%	54%	69%		
	- Can you get your stored property if you need it?	25%	40%	28%	42%		

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Number of completed questionnaires returned

Have a disability	Do not have a disability
<b>69</b>	<b>103</b>

Mental health problems	No mental health problems
<b>95</b>	<b>77</b>

<b>FOOD AND CANTEEN</b>			
5.2	Do you get enough to eat at meal-times always / most of the time?	<b>30%</b>	<b>43%</b>
5.3	Does the shop / canteen sell the things that you need?	<b>57%</b>	<b>62%</b>
<b>RELATIONSHIPS WITH STAFF</b>			
6.1	Do most staff here treat you with respect?	<b>81%</b>	<b>75%</b>
6.2	Are there any staff here you could turn to if you had a problem?	<b>85%</b>	<b>73%</b>
6.3	In the last week, has any member of staff talked to you about how you are getting on?	<b>34%</b>	<b>25%</b>
6.6	Do you feel that you are treated as an individual in this prison?	<b>31%</b>	<b>36%</b>
<b>FAITH</b>			
<i>For those who have a religion:</i>			
7.2	Are your religious beliefs respected here?	<b>65%</b>	<b>68%</b>
7.3	Are you able to speak to a Chaplain of your faith in private, if you want to?	<b>68%</b>	<b>76%</b>
<b>CONTACT WITH FAMILY AND FRIENDS</b>			
8.1	Have staff here encouraged you to keep in touch with your family / friends?	<b>25%</b>	<b>19%</b>
8.2	Have you had any problems with sending or receiving mail (letters or parcels)?	<b>54%</b>	<b>42%</b>
8.3	Are you able to use a phone every day (if you have credit)?	<b>87%</b>	<b>88%</b>
<i>For those who get visits:</i>			
8.7	Are your visitors usually treated respectfully by staff?	<b>67%</b>	<b>79%</b>
<b>TIME OUT OF CELL</b>			
9.2	Do you usually spend less than 2 hours out of your cell on a typical weekday?	<b>22%</b>	<b>8%</b>
	Do you usually spend 10 hours or more out of your cell on a typical weekday?	<b>4%</b>	<b>10%</b>
<i>For those who use the library:</i>			
9.9	Does the library have a wide enough range of materials to meet your needs?	<b>76%</b>	<b>67%</b>
<b>APPLICATIONS, COMPLAINTS AND LEGAL RIGHTS</b>			
10.1	Is it easy for you to make an application?	<b>71%</b>	<b>80%</b>
<i>For those who have made an application:</i>			
10.2	Are applications usually dealt with fairly?	<b>49%</b>	<b>64%</b>
10.3	Is it easy for you to make a complaint?	<b>59%</b>	<b>49%</b>
<i>For those who have made a complaint:</i>			
10.4	Are complaints usually dealt with fairly?	<b>27%</b>	<b>35%</b>
10.5	Have you ever been prevented from making a complaint here when you wanted to?	<b>34%</b>	<b>17%</b>

<b>29%</b>	<b>49%</b>
<b>56%</b>	<b>66%</b>
<b>76%</b>	<b>80%</b>
<b>80%</b>	<b>76%</b>
<b>35%</b>	<b>20%</b>
<b>27%</b>	<b>43%</b>
<b>61%</b>	<b>72%</b>
<b>69%</b>	<b>76%</b>
<b>20%</b>	<b>22%</b>
<b>52%</b>	<b>40%</b>
<b>86%</b>	<b>88%</b>
<b>60%</b>	<b>86%</b>
<b>21%</b>	<b>7%</b>
<b>7%</b>	<b>11%</b>
<b>69%</b>	<b>73%</b>
<b>72%</b>	<b>82%</b>
<b>57%</b>	<b>63%</b>
<b>56%</b>	<b>49%</b>
<b>27%</b>	<b>37%</b>
<b>27%</b>	<b>21%</b>

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\* less than 1% probability that the difference is due to chance

Number of completed questionnaires returned

Have a disability	Do not have a disability
<b>69</b>	<b>103</b>

Mental health problems	No mental health problems
<b>95</b>	<b>77</b>

<b>HEALTH CARE</b>			
11.1	Is it very / quite easy to see:		
	- Doctor?	19%	23%
	- Nurse?	39%	46%
	- Dentist?	16%	10%
	- Mental health workers?	20%	15%
<i>For those who have mental health problems:</i>			
11.4	Have you been helped with your mental health problems in this prison?	36%	34%
11.5	Do you think the overall quality of the health services here is very / quite good?	32%	35%
<b>OTHER SUPPORT NEEDS</b>			
<i>For those who have a disability:</i>			
12.2	Are you getting the support you need?	31%	
<b>SAFETY</b>			
14.1	Have you ever felt unsafe here?	67%	57%
14.2	Do you feel unsafe now?	40%	28%
14.3	Not experienced bullying / victimisation by other prisoners	22%	38%
14.4	If you were being bullied / victimised by other prisoners here, would you report it?	41%	39%
14.5	Not experienced bullying / victimisation by members of staff	56%	71%
14.6	If you were being bullied / victimised by staff here, would you report it?	55%	58%
<b>BEHAVIOUR MANAGEMENT</b>			
15.1	Do the incentives or rewards in this prison (e.g. enhanced status) encourage you to behave well?	37%	47%
15.2	Do you feel you have been treated fairly in the behaviour management scheme (e.g. IEP) in this prison?	39%	52%
15.3	Have you been physically restrained by staff in this prison, in the last 6 months?	12%	10%
15.5	Have you spent one or more nights in the segregation unit in this prison in the last 6 months?	8%	5%
<b>EDUCATION, SKILLS AND WORK</b>			
16.3	Do staff encourage you to attend education, training or work?	48%	50%
<b>PLANNING AND PROGRESSION</b>			
17.1	Do you have a custody plan?	39%	50%
<i>For those who have a custody plan:</i>			
17.3	Are staff helping you to achieve your objectives or targets?	46%	47%
<b>PREPARATION FOR RELEASE</b>			
<i>For those who expect to be released in the next 3 months:</i>			
18.3	Is anybody helping you to prepare for your release?	60%	65%
<b>FINAL QUESTION ABOUT THIS PRISON</b>			
20.1	Do you think your experiences in this prison have made you less likely to offend in the future?	45%	49%

19%	25%
39%	47%
13%	12%
22%	12%
36%	
27%	44%
31%	
67%	55%
42%	24%
20%	43%
41%	41%
53%	78%
53%	63%
34%	53%
46%	49%
14%	7%
8%	4%
47%	52%
42%	49%
41%	53%
64%	59%
45%	51%

## HMP Channings Wood 2018

### Comparison of survey responses between sub-populations of prisoners

In this table the following analyses are presented:

- responses of prisoners aged 25 and under are compared with those of prisoners over 25
  - responses of prisoners aged 50 and over are compared with those of prisoners under 50
- Please note that these analyses are based on summary data from selected survey questions only.

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Number of completed questionnaires returned

25 and under	Over 25	50 and over	Under 50
32	145	44	133

DEMOGRAPHICS AND OTHER BACKGROUND INFORMATION					
1.2	Are you under 21 years of age?	3%			1%
	Are you 50 years of age or older?		30%		
1.3	Are you from a minority ethnic group?	19%	11%	2%	16%
7.1	Are you Muslim?	10%	7%	0%	10%
11.3	Do you have any mental health problems?	57%	55%	30%	64%
12.1	Do you consider yourself to have a disability?	26%	43%	33%	43%
19.2	Are you a foreign national?	13%	1%	2%	4%
19.3	Are you from a traveller community? (e.g. Gypsy, Roma, Irish Traveller)	3%	4%	0%	6%
ARRIVAL AND RECEPTION					
2.3	When you were searched in reception, was this done in a respectful way?	78%	84%	86%	82%
2.4	Overall, were you treated very / quite well in reception?	87%	88%	91%	87%
2.5	When you first arrived, did you have any problems?	72%	79%	61%	83%
<i>For those who had any problems when they first arrived:</i>					
2.6	Did staff help you to deal with these problems?	23%	34%	40%	30%
FIRST NIGHT AND INDUCTION					
3.3	Did you feel safe on your first night here?	72%	57%	54%	61%
3.5	Have you had an induction at this prison?	94%	94%	95%	94%
<i>For those who have had an induction:</i>					
3.5	Did your induction cover everything you needed to know about this prison?	57%	59%	65%	56%
ON THE WING					
4.2	Is your cell call bell normally answered within 5 minutes?	19%	37%	50%	28%
4.3	On the wing or houseblock you currently live on:				
	- Do you normally have enough clean, suitable clothes for the week?	56%	68%	86%	59%
	- Can you shower every day?	87%	92%	96%	89%
	- Do you have clean sheets every week?	77%	84%	96%	78%
	- Do you get cell cleaning materials every week?	53%	70%	86%	61%
	- Is it normally quiet enough for you to relax or sleep at night?	53%	61%	71%	56%
	- Can you get your stored property if you need it?	10%	39%	47%	30%



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Number of completed questionnaires returned

	25 and under	Over 25	50 and over	Under 50
	32	145	44	133

FOOD AND CANTEN					
5.2	Do you get enough to eat at meal-times always / most of the time?	32%	39%	61%	30%
5.3	Does the shop / canteen sell the things that you need?	60%	61%	61%	61%
RELATIONSHIPS WITH STAFF					
6.1	Do most staff here treat you with respect?	63%	81%	86%	75%
6.2	Are there any staff here you could turn to if you had a problem?	74%	79%	81%	77%
6.3	In the last week, has any member of staff talked to you about how you are getting on?	21%	31%	30%	29%
6.6	Do you feel that you are treated as an individual in this prison?	23%	37%	42%	32%
FAITH					
<i>For those who have a religion:</i>					
7.2	Are your religious beliefs respected here?	58%	68%	75%	62%
7.3	Are you able to speak to a Chaplain of your faith in private, if you want to?	78%	71%	85%	67%
CONTACT WITH FAMILY AND FRIENDS					
8.1	Have staff here encouraged you to keep in touch with your family / friends?	23%	22%	23%	21%
8.2	Have you had any problems with sending or receiving mail (letters or parcels)?	50%	46%	46%	47%
8.3	Are you able to use a phone every day (if you have credit)?	90%	86%	93%	85%
<i>For those who get visits:</i>					
8.7	Are your visitors usually treated respectfully by staff?	68%	77%	84%	72%
TIME OUT OF CELL					
9.2	Do you usually spend less than 2 hours out of your cell on a typical weekday?	24%	12%	7%	17%
	Do you usually spend 10 hours or more out of your cell on a typical weekday?	3%	9%	21%	4%
<i>For those who use the library:</i>					
9.9	Does the library have a wide enough range of materials to meet your needs?	68%	72%	72%	71%
APPLICATIONS, COMPLAINTS AND LEGAL RIGHTS					
10.1	Is it easy for you to make an application?	68%	78%	88%	72%
<i>For those who have made an application:</i>					
10.2	Are applications usually dealt with fairly?	44%	62%	74%	53%
10.3	Is it easy for you to make a complaint?	48%	54%	64%	50%
<i>For those who have made a complaint:</i>					
10.4	Are complaints usually dealt with fairly?	21%	33%	48%	25%
10.5	Have you ever been prevented from making a complaint here when you wanted to?	20%	25%	20%	26%

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\* less than 1% probability that the difference is due to chance

Number of completed questionnaires returned

	25 and under	Over 25	50 and over	Under 50
	32	145	44	133

HEALTH CARE					
11.1	Is it very / quite easy to see:				
	- Doctor?	21%	22%	32%	19%
	- Nurse?	35%	45%	55%	39%
	- Dentist?	3%	14%	17%	11%
	- Mental health workers?	21%	17%	15%	19%
<i>For those who have mental health problems:</i>					
11.4	Have you been helped with your mental health problems in this prison?	44%	34%	33%	36%
11.5	Do you think the overall quality of the health services here is very / quite good?	30%	35%	42%	32%
OTHER SUPPORT NEEDS					
<i>For those who have a disability:</i>					
12.2	Are you getting the support you need?	0%	33%	46%	27%
SAFETY					
14.1	Have you ever felt unsafe here?	45%	64%	61%	61%
14.2	Do you feel unsafe now?	19%	36%	26%	35%
14.3	Not experienced bullying / victimisation by other prisoners	50%	27%	34%	30%
14.4	If you were being bullied / victimised by other prisoners here, would you report it?	29%	43%	50%	37%
14.5	Not experienced bullying / victimisation by members of staff	66%	65%	83%	59%
14.6	If you were being bullied / victimised by staff here, would you report it?	42%	61%	68%	54%
BEHAVIOUR MANAGEMENT					
15.1	Do the incentives or rewards in this prison (e.g. enhanced status) encourage you to behave well?	26%	46%	59%	37%
15.2	Do you feel you have been treated fairly in the behaviour management scheme (e.g. IEP) in this prison?	37%	49%	57%	43%
15.3	Have you been physically restrained by staff in this prison, in the last 6 months?	26%	7%	2%	13%
15.5	Have you spent one or more nights in the segregation unit in this prison in the last 6 months?	23%	2%	0%	8%
EDUCATION, SKILLS AND WORK					
16.3	Do staff encourage you to attend education, training or work?	55%	49%	57%	48%
PLANNING AND PROGRESSION					
17.1	Do you have a custody plan?	43%	46%	60%	41%
<i>For those who have a custody plan:</i>					
17.3	Are staff helping you to achieve your objectives or targets?	39%	48%	50%	45%
PREPARATION FOR RELEASE					
<i>For those who expect to be released in the next 3 months:</i>					
18.3	Is anybody helping you to prepare for your release?	50%	64%	58%	63%
FINAL QUESTION ABOUT THIS PRISON					
20.1	Do you think your experiences in this prison have made you less likely to offend in the future?	47%	47%	55%	45%

## HMP Channings Wood 2018

### Comparison of survey responses from different residential locations

In this table responses from the vulnerable prisoner units (Living Blocks 1, 5 and 7) are compared with those from the rest of the establishment.

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Number of completed questionnaires returned

Living Blocks 1, 5 and 7	76	Living Blocks 2, 3, 4, 6 and 8	102
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DEMOGRAPHICS AND OTHER BACKGROUND INFORMATION			
1.2	Are you under 21 years of age?	0%	1%
	Are you 25 years of age or younger?	5%	25%
	Are you 50 years of age or older?	39%	15%
	Are you 70 years of age or older?	3%	0%
1.3	Are you from a minority ethnic group?	4%	19%
1.4	Have you been in this prison for less than 6 months?	24%	43%
1.5	Are you currently serving a sentence?	100%	99%
	Are you on recall?	12%	8%
1.6	Is your sentence less than 12 months?	5%	6%
	Are you here under an indeterminate sentence for public protection (IPP prisoner)?	11%	1%
7.1	Are you Muslim?	3%	11%
11.3	Do you have any mental health problems?	58%	52%
12.1	Do you consider yourself to have a disability?	43%	37%
19.1	Do you have any children under the age of 18?	32%	44%
19.2	Are you a foreign national?	1%	5%
19.3	Are you from a traveller community? (e.g. Gypsy, Roma, Irish Traveller)	4%	3%
19.4	Have you ever been in the armed services?	16%	6%
19.5	Is your gender female or non-binary?	0%	1%
19.6	Are you homosexual, bisexual or other sexual orientation?	11%	3%
19.7	Do you identify as transgender or transsexual?	1%	1%
ARRIVAL AND RECEPTION			
2.1	Were you given up-to-date information about this prison before you came here?	3%	21%
2.2	When you arrived at this prison, did you spend less than 2 hours in reception?	28%	49%
2.3	When you were searched in reception, was this done in a respectful way?	80%	86%
2.4	Overall, were you treated very / quite well in reception?	82%	93%

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Number of completed questionnaires returned

Living Blocks 1, 5 and 7	76
Living Blocks 2, 3, 4, 6 and 8	102

2.5	When you first arrived, did you have any problems?	82%	75%
2.5	Did you have problems with:		
	- Getting phone numbers?	22%	26%
	- Contacting family?	27%	24%
	- Arranging care for children or other dependents?	4%	0%
	- Contacting employers?	1%	1%
	- Money worries?	8%	13%
	- Housing worries?	12%	16%
	- Feeling depressed?	51%	25%
	- Feeling suicidal?	27%	4%
	- Other mental health problems?	27%	24%
	- Physical health problems?	16%	15%
	- Drugs or alcohol (e.g. withdrawal)?	10%	15%
	- Getting medication?	37%	17%
	- Needing protection from other prisoners?	24%	7%
	- Lost or delayed property?	18%	27%
	<i>For those who had any problems when they first arrived:</i>		
2.6	Did staff help you to deal with these problems?	31%	32%
<b>FIRST NIGHT AND INDUCTION</b>			
3.1	Before you were locked up on your first night, were you offered:		
	- Tobacco or nicotine replacement?	34%	49%
	- Toiletries / other basic items?	31%	51%
	- A shower?	8%	50%
	- A free phone call?	8%	28%
	- Something to eat?	65%	70%
	- The chance to see someone from health care?	50%	59%
	- The chance to talk to a Listener or Samaritans?	18%	27%
	- Support from another prisoner (e.g. Insider or buddy)?	18%	21%
	- None of these?	8%	10%
3.2	On your first night in this prison, was your cell very / quite clean?	30%	41%
3.3	Did you feel safe on your first night here?	31%	81%
3.4	In your first few days here, did you get:		
	- Access to the prison shop / canteen?	29%	38%
	- Free PIN phone credit?	9%	33%
	- Numbers put on your PIN phone?	28%	43%
3.5	Have you had an induction at this prison?	97%	92%
	<i>For those who have had an induction:</i>		
3.5	Did your induction cover everything you needed to know about this prison?	63%	56%

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Number of completed questionnaires returned

Living Blocks 1, 5 and 7	Living Blocks 2, 3, 4, 6 and 8
76	102

ON THE WING			
4.1	Are you in a cell on your own?	79%	83%
4.2	Is your cell call bell normally answered within 5 minutes?	28%	38%
4.3	On the wing or houseblock you currently live on:		
	- Do you normally have enough clean, suitable clothes for the week?	74%	60%
	- Can you shower every day?	93%	91%
	- Do you have clean sheets every week?	92%	76%
	- Do you get cell cleaning materials every week?	77%	62%
	- Is it normally quiet enough for you to relax or sleep at night?	54%	65%
	- Can you get your stored property if you need it?	41%	30%
4.4	Are the communal / shared areas of your wing or houseblock normally very / quite clean?	70%	48%
FOOD AND CANTEEN			
5.1	Is the quality of the food in this prison very / quite good?	27%	19%
5.2	Do you get enough to eat at meal-times always / most of the time?	41%	35%
5.3	Does the shop / canteen sell the things that you need?	67%	56%
RELATIONSHIPS WITH STAFF			
6.1	Do most staff here treat you with respect?	81%	76%
6.2	Are there any staff here you could turn to if you had a problem?	80%	77%
6.3	In the last week, has any member of staff talked to you about how you are getting on?	26%	33%
6.4	Do you have a personal officer?	92%	76%
<i>For those who have a personal officer:</i>			
6.4	Is your personal or named officer very / quite helpful?	38%	43%
6.5	Do you regularly see prison governors, directors or senior managers talking to prisoners?	7%	11%
6.6	Do you feel that you are treated as an individual in this prison?	27%	41%
6.7	Are prisoners here consulted about things like food, canteen, health care or wing issues?	60%	49%
	If so, do things sometimes change?	16%	34%
FAITH			
7.1	Do you have a religion?	69%	61%
<i>For those who have a religion:</i>			
7.2	Are your religious beliefs respected here?	69%	64%
7.3	Are you able to speak to a Chaplain of your faith in private, if you want to?	82%	66%
7.4	Are you able to attend religious services, if you want to?	90%	75%
CONTACT WITH FAMILY AND FRIENDS			
8.1	Have staff here encouraged you to keep in touch with your family / friends?	16%	26%
8.2	Have you had any problems with sending or receiving mail (letters or parcels)?	43%	48%
8.3	Are you able to use a phone every day (if you have credit)?	92%	82%
8.4	Is it very / quite easy for your family and friends to get here?	25%	30%
8.5	Do you get visits from family/friends once a week or more?	7%	14%
<i>For those who get visits:</i>			
8.6	Do visits usually start and finish on time?	32%	21%
8.7	Are your visitors usually treated respectfully by staff?	73%	76%

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Number of completed questionnaires returned

Living Blocks 1, 5 and 7	76	Living Blocks 2, 3, 4, 6 and 8	102
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TIME OUT OF CELL			
9.1	Do you know what the unlock and lock-up times are supposed to be here?	88%	91%
<i>For those who know what the unlock and lock-up times are supposed to be:</i>			
9.1	Are these times usually kept to?	38%	49%
9.2	Do you usually spend less than 2 hours out of your cell on a typical weekday?	10%	16%
	Do you usually spend 10 hours or more out of your cell on a typical weekday?	10%	7%
9.3	Do you usually spend less than 2 hours out of your cell on a typical Saturday or Sunday?	21%	12%
	Do you usually spend 10 hours or more out of your cell on a typical Saturday or Sunday?	10%	4%
9.4	Do you have time to do domestics more than 5 days in a typical week?	59%	59%
9.5	Do you get association more than 5 days in a typical week, if you want it?	69%	60%
9.6	Could you go outside for exercise more than 5 days in a typical week, if you wanted to?	60%	59%
9.7	Do you typically go to the gym twice a week or more?	30%	63%
9.8	Do you typically go to the library once a week or more?	57%	47%
<i>For those who use the library:</i>			
9.9	Does the library have a wide enough range of materials to meet your needs?	66%	77%
APPLICATIONS, COMPLAINTS AND LEGAL RIGHTS			
10.1	Is it easy for you to make an application?	82%	71%
<i>For those who have made an application:</i>			
10.2	Are applications usually dealt with fairly?	61%	57%
	Are applications usually dealt with within 7 days?	47%	36%
10.3	Is it easy for you to make a complaint?	60%	50%
<i>For those who have made a complaint:</i>			
10.4	Are complaints usually dealt with fairly?	40%	24%
	Are complaints usually dealt with within 7 days?	27%	12%
10.5	Have you ever been prevented from making a complaint here when you wanted to?	26%	22%

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\* less than 1% probability that the difference is due to chance

Number of completed questionnaires returned

Living Blocks 1, 5 and 7	76	Living Blocks 2, 3, 4, 6 and 8	102
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<i>For those who need it, is it easy to:</i>				
10.6	Communicate with your solicitor or legal representative?	31%	38%	
	Attend legal visits?	44%	42%	
	Get bail information?	11%	17%	
<i>For those who have had legal letters:</i>				
10.7	Have staff here ever opened letters from your solicitor or legal representative when you were not present?	56%	51%	
<b>HEALTH CARE</b>				
11.1	Is it very / quite easy to see:			
	- Doctor?	17%	25%	
	- Nurse?	46%	40%	
	- Dentist?	9%	15%	
11.2	Do you think the quality of the health service is very / quite good from:			
	- Doctor?	60%	53%	
	- Nurse?	60%	54%	
	- Dentist?	37%	41%	
11.3	Do you have any mental health problems?	58%	52%	
	<i>For those who have mental health problems:</i>			
	11.4	Have you been helped with your mental health problems in this prison?	26%	41%
	11.5	Do you think the overall quality of the health services here is very / quite good?	34%	35%
<b>OTHER SUPPORT NEEDS</b>				
12.1	Do you consider yourself to have a disability?	43%	37%	
<i>For those who have a disability:</i>				
12.2	Are you getting the support you need?	26%	36%	
12.3	Have you been on an ACCT in this prison?	30%	20%	
<i>For those who have been on an ACCT:</i>				
12.4	Did you feel cared for by staff?	32%	65%	
12.5	Is it very / quite easy for you to speak to a Listener if you need to?	64%	40%	
<b>ALCOHOL AND DRUGS</b>				
13.1	Did you have an alcohol problem when you came into this prison?	12%	21%	
<i>For those who had / have an alcohol problem:</i>				
13.2	Have you been helped with your alcohol problem in this prison?	44%	65%	
13.3	Did you have a drug problem when you came into this prison (including illicit drugs and medication not prescribed to you)?	19%	38%	
13.4	Have you developed a problem with illicit drugs since you have been in this prison?	21%	30%	
13.5	Have you developed a problem with taking medication not prescribed to you since you have been in this prison?	15%	9%	
<i>For those who had / have a drug problem:</i>				
13.6	Have you been helped with your drug problem in this prison?	30%	40%	
13.7	Is it very / quite easy to get illicit drugs in this prison?	75%	76%	
13.8	Is it very / quite easy to get alcohol in this prison?	27%	61%	

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Number of completed questionnaires returned

Living Blocks 1, 5 and 7	76	Living Blocks 2, 3, 4, 6 and 8	102
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SAFETY			
14.1	Have you ever felt unsafe here?	81%	44%
14.2	Do you feel unsafe now?	41%	27%
14.3	Have you experienced any of the following from other prisoners here:		
	- Verbal abuse?	78%	34%
	- Threats or intimidation?	72%	32%
	- Physical assault?	28%	28%
	- Sexual assault?	3%	1%
	- Theft of canteen or property?	65%	27%
	- Other bullying / victimisation?	39%	23%
	- Not experienced any of these from prisoners here	8%	50%
14.4	If you were being bullied / victimised by other prisoners here, would you report it?	60%	25%
14.5	Have you experienced any of the following from staff here:		
	- Verbal abuse?	30%	29%
	- Threats or intimidation?	18%	15%
	- Physical assault?	10%	2%
	- Sexual assault?	1%	0%
	- Theft of canteen or property?	11%	1%
	- Other bullying / victimisation?	18%	10%
	- Not experienced any of these from staff here	64%	66%
14.6	If you were being bullied / victimised by staff here, would you report it?	69%	50%
BEHAVIOUR MANAGEMENT			
15.1	Do the incentives or rewards in this prison (e.g. enhanced status) encourage you to behave well?	47%	40%
15.2	Do you feel you have been treated fairly in the behaviour management scheme (e.g. IEP) in this prison?	55%	40%
15.3	Have you been physically restrained by staff in this prison, in the last 6 months?	6%	13%
<i>For those who have been restrained in the last 6 months:</i>			
15.4	Did anyone come and talk to you about it afterwards?	25%	9%
15.5	Have you spent one or more nights in the segregation unit in this prison in the last 6 months?	1%	6%
<i>For those who have spent one or more nights in the segregation unit in the last 6 months:</i>			
15.6	Were you treated well by segregation staff?	0%	80%
	Could you shower every day?		
	Could you go outside for exercise every day?		
	Could you use the phone every day (if you had credit)?		



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EDUCATION, SKILLS AND WORK			
16.1	In this prison, is it easy to get into the following activities:		
	- Education?	38%	71%
	- Vocational or skills training?	29%	52%
	- Prison job?	70%	56%
	- Voluntary work outside of the prison?	0%	6%
	- Paid work outside of the prison?	1%	7%
16.2	In this prison, have you done the following activities:		
	- Education?	64%	80%
	- Vocational or skills training?	63%	73%
	- Prison job?	91%	85%
	- Voluntary work outside of the prison?	22%	46%
	- Paid work outside of the prison?	20%	43%
<i>For those who have done the following activities, do you think they will help you on release:</i>			
	- Education?	57%	57%
	- Vocational or skills training?	66%	56%
	- Prison job?	43%	35%
	- Voluntary work outside of the prison?	50%	59%
	- Paid work outside of the prison?	54%	56%
16.3	Do staff encourage you to attend education, training or work?	39%	57%
PLANNING AND PROGRESSION			
17.1	Do you have a custody plan?	48%	44%
<i>For those who have a custody plan:</i>			
17.2	Do you understand what you need to do to achieve your objectives or targets?	86%	85%
17.3	Are staff helping you to achieve your objectives or targets?	35%	55%
17.4	In this prison, have you done:		
	- Offending behaviour programmes?	50%	51%
	- Other programmes?	31%	43%
	- One to one work?	53%	39%
	- Been on a specialist unit?	22%	31%
	- ROTL - day or overnight release?	18%	30%
<i>For those who have done the following, did they help you to achieve your objectives or targets:</i>			
	- Offending behaviour programmes?	63%	74%
	- Other programmes?	44%	67%
	- One to one work?	69%	57%
	- Being on a specialist unit?	67%	55%
	- ROTL - day or overnight release?	40%	64%

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PREPARATION FOR RELEASE			
18.1	Do you expect to be released in the next 3 months?	23%	27%
<i>For those who expect to be released in the next 3 months:</i>			
18.2	Is this prison very / quite near to your home area or intended release address?	41%	54%
18.3	Is anybody helping you to prepare for your release?	59%	67%
18.4	Do you need help to sort out the following for when you are released:		
	- Finding accommodation?	56%	48%
	- Getting employment?	67%	52%
	- Setting up education or training?	47%	35%
	- Arranging benefits?	80%	63%
	- Sorting out finances?	53%	58%
	- Support for drug or alcohol problems?	27%	46%
	- Health / mental Health support?	56%	41%
	- Social care support?	29%	23%
	- Getting back in touch with family or friends?	40%	44%
18.4	Are you getting help to sort out the following for when you are released, if you need it:		
	- Finding accommodation?	44%	42%
	- Getting employment?	0%	42%
	- Setting up education or training?	14%	13%
	- Arranging benefits?	17%	53%
	- Sorting out finances?	0%	36%
	- Support for drug or alcohol problems?	25%	60%
	- Health / mental Health support?	22%	67%
	- Social care support?	0%	20%
	- Getting back in touch with family or friends?	0%	30%
FINAL QUESTION ABOUT THIS PRISON			
20.1	Do you think your experiences in this prison have made you less likely to offend in the future?	57%	41%